


OCT 1961

COUNTY BOROUGH OF WIGAN



*Annual Report*  
on the  
*Health*  
of the  
*County Borough of Wigan*  
1960



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b30276676>

COUNTY BOROUGH OF WIGAN



*Annual Report*  
*on the*  
*Health*  
*of the*  
*County Borough of Wigan*  
*1960*

J. HAWORTH HILDITCH, M.B., Ch.B., D.P.H., (Vict.)

Medical Officer of Health.

Principal School Medical Officer.

Medical Referee of the Borough Crematorium.





# CONTENTS

[illegible]

## HEALTH COMMITTEE, 1960

### (Appointed 25th May, 1960)

Chairman	....	....	Councillor J. T. LYNCH, J.P.	
Vice-Chairman	....	....	THE MAYOR—Councillor J. BOWDEN, J.P.	
Alderman	....	....	H. DOWLING, J.P.	
Councillors	....	....	J. COLLINS	F. CONNOLLY
			P. DONNELLY	C. FOSTER
			J. T. FARRIMOND	A. J. LOWE, J.P.
			MRS. E. NAYLOR	T. MONKS
			J. RANKIN	MISS A. PEET
			J. TABERNER	S. SHERRATT
Co-opted Members	....		DR. D. W. JOHNSON	MR. J. HEGARTY
			MRS. B. G. HOUGHTON	MRS. C. RAYNOR
			Councillor S. TAYLOR	

### STAFF, 1960

Medical Officer of Health	....	J. HAWORTH HILDITCH, M.B., Ch.B. D.P.H. (Vict.).
Assistant Medical Officers		I. M. SMITH, M.B., Ch.B., D.P.H. *R. McLEAN BAIN, M.B., Ch.B., D.P.H.
Dental Officer	....	*C. F. L. PURSLOW, L.D.S., R.C.S., Eng.
Consultant Obstetric Surgeon		*R. L. HARTLEY, M.D., M.R.C.O.G., F.R.C.S. (E.).
Chest Physician	....	*E. H. W. DEANE, M.B., B.S.
Consultant Venereologist	....	*PHILIP S. SILVER, M.R.C.S., L.R.C.P.
Orthopaedic Surgeon	....	*MISS M. F. JOHNSTONE, M.B., Ch.B.
Ophthalmic Surgeon	....	*V. T. LEES, M.B., Ch.B., D.O.M.S.

Public Analyst .... \*J. GRAHAM SHERRATT, B.Sc., F.R.I.C.

Chief Public Health Inspector J. B. MARSH (*a*) (*b*) (*h*)

Deputy Chief Public Health  
Inspector .... P. STRAFFORD (*a*) (*b*) (*h*)

Public Health Inspectors .... R. C. WOODS (*a*) (*b*) (*to 30th Sept.*).

C. JACKSON (*a*) (*b*)

E. HARRIS (*a*) (*b*) (*h*)

E. MARSDEN (*a*) (*b*) (*h*)

D. M. BOLD (*a*)

M. H. JAGASIA (*a*) (*b*)

L. J. JONES (*a*) (*b*) (*from 16th May*)

K. PARKIN (*a*) (*b*) (*from 25th July*).

Senior Health Visitor .... E. M. WRIGHT (*c*) (*d*) (*e*) (*g*)

Health Visitors .... C. JACKSON (*c*) (*d*) (*e*) (*g*)

C. V. KILCULLEN (*d*) (*e*)

V. M. PARKINSON (*c*) (*d*) (*e*) (*to 31st Oct.*).

M. J. WALMESLEY (*c*) (*d*) (*e*)

Z. M. VERNON (*c*) (*d*) (*e*) (*f*) (*g*)

P. M. KING (*c*) (*d*) (*e*)

J. WHALLEY (*c*) (*d*) (*e*)

M. E. MILLS (*c*) (*d*) (*e*)

I. PATERSON (*c*) (*d*) (*e*)

Tuberculosis Visitor .... E. CODY (*c*) (*d*)

Supervisor of Midwives .... W. KAY (c) (d)

Midwives :

R. M. HALLIWELL (c) (d)	D. HITCHEN (c) (d)
M. QUINN (c) (d)	M. K. PATEL (c) (d) ( <i>from 1st Mar.</i> ).
E. S. ROGERS (c)	C. RYDER (c) (d)
P. WAITE (c) (d)	F. O'DWYER (c) (d)
M. P. HURST (c) (d)	M. C. DIX (c) (d) ( <i>from 1st Sept.</i> ).
M. WOODWARD ( <i>from 1st Aug.</i> ).	

Ellesmere Road Nursery Matron .... M. F. LUCAS (d) (f)

Home Nursing Superintendent .... L. MAHER (c) (d) (g)

Hope School Supervisor .... J. HANSON

Marylebone Centre Senior Craft  
Instructor .... E. HILTON

Lay Administrative Officer .... G. CREE, D.M.A.

Mental Health Service :

Mental Welfare Officers ....	V. CROWLEY ( <i>to 18th Sept.</i> ).
	J. A. PIETRE, B.A.
	J. AINSCOUGH ( <i>died 11th Feb.</i> ).
	M. O'DONNELL
	A. KENNEDY ( <i>from 1st April.</i> ).

Welfare Services :

Senior Assistant ....	A. SIMM
-----------------------	---------

Ambulance Service :

Ambulance Superintendent ....	T. A. ATHERTON, B.E.M.
-------------------------------	------------------------

\* Part-Time Officers.

- (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board.
- (b) Meat Inspectors Certificate.
- (c) Certificate, Central Midwives Board.
- (d) General Trained.
- (e) The Royal Sanitary Institute Health Visitors Certificate.
- (f) Registered Fever Nurse.
- (g) Queen's Nurse.
- (h) The Royal Sanitary Institute Smoke Inspectors Certificate.



## INTRODUCTION

*To the Mayor, Aldermen and Councillors of the County Borough of Wigan.*

TO BE A PRODIGAL'S FAVOURITE—then, worse truth,

A Miser's Pensioner—behold our lot!

O Man, that from thy fair and shining youth

Age might but take the things Youth needed not!

*“The Small Celandine”—William Wordsworth.*

The opening years of the Nineteenth Century were not particularly propitious ones in which to “grow old with dignity.” The founders of the Welfare State were unborn, yet a poet, with such economy of words managed to convey in four lines the essence of the difficulties of ageing. One hundred and fifty years later we are battling with the same problems—the over-protection of youth and the neglect of the ageing population at a time when they most need help. The task before the Health Departments in the next ten years is in my opinion largely to shift the emphasis from expansion of services for the younger elements and to concentrate our greatest effort on trying to overcome the many factors which prevent people from growing old with peace of mind. In the past few decades we have succeeded in adding years to the life span. It is the duty of the community services now to add life to years and above all to abolish the loneliness of old age. Often the old people who are most in need of help are the most retiring by nature and are apt to get themselves into serious difficulties before the Department becomes aware of their needs. To help obviate this a comprehensive live register has been compiled of all aged people in the Borough with a separate section for those who are known to live alone. These people have been visited and the facilities available from the Department and from other agencies have been explained to them, along with a simple method of calling help should they require it prior to the next visit.

The opening of the new hostel at Springfield has greatly eased the difficulties of the Welfare Officers in finding accommodation, especially for the frail ambulant and the case requiring bed rest as a regular feature of care. It has also enabled us to reduce the number of beds in St. Stephens Hostel which is the least satisfactory of our accommodation. The lot of those who are unable yet to secure accommodation in a hostel has been made less burdensome by the intensification of “short term care,” either to allow permanent hosts to proceed on holiday or more simply to provide a change of atmosphere, good food and company to an aged person who has tended to deteriorate in home surroundings, perhaps following a winter illness.

For those who lack comfort, reading material, radio, television or who are just lonely and bored, there are the two units at Crompton Street and Tunstall Lane which offer “day care” on a limited scale and which we hope are the fore-runners of a more comprehensive service.

During the year plans were made to take over and expand the Chiropody Services at present being run on a voluntary basis by the Rotary Club of Wigan. Unfortunately financial considerations led to the postponement of this venture and we are greatly indebted to the voluntary workers for their continued support.

We were not sorry to see the closure of the Reception Centre which, although useful in itself, had brought to the town many persons of doubtful character in the course of their endless journeying up and down the country. Throughout the years many colourful and odorous wayfarers have appeared at its gates in the evenings and have left the following day refreshed and in a more wholesome state than when they entered. Latterly, however, the pattern had changed, the bulk of the travellers being restless persons in the younger age groups who eschewed common lodging houses and the task of the staff in co-operation with officers of the National Assistance Board was to encourage them to lead a more settled way of life.

The administration of Section 21 (b) of the National Assistance Act, 1948, has during the past two or three years become something of a problem. Under this Section local authorities are empowered to provide temporary accommodation for individuals and for families who are unhoused in unforeseen circumstances. Although originally intended to meet the needs of fire or flood victims the accommodation has always tended to be occupied by families or parts of families evicted from their accommodation, generally through proving to be undesirable tenants, but occasionally through no fault of their own. Inevitably the "families with problems" drifted into more or less permanent occupation of the accommodation provided and the Department has been concerned with their gradual rehabilitation. Originally we had three substandard dwellings for use as "half way houses" but as these have been included in clearance programmes we have no outlet and progress in this work is at present completely blocked.

1960 will probably be remembered as the year in which the Mental Health Services were resuscitated, re-organised and the "shop windows" of both hospital and local authority services re-dressed. Unfortunately the "goods" have remained much the same and some hard thinking and tactical manoeuvre will be required of everyone in the service if the visions of the Royal Commission signatories are to be realised. To take but one facet, there is no absolute freedom and to give a long-stay case leave to discharge himself from hospital can be to help him into a world of bondage surrounded by restrictions far greater and more frustrating than he experienced in a therapeutic community. If the individual or the community is to benefit, the domiciliary services must be staffed by mature, energetic and well-trained case workers, backed by adequate social facilities and sheltered employment.

On page 59 we are reporting the first eight months occupation of Marylebone Training Centre, a magnificent achievement for both staff and workers and moreover one which shows how much can be done with little capital outlay.

The maternity services have continued to operate as in previous years. There have been fewer domiciliary births this year, representing 43% of all births ascribed to the Borough, but the great increase of mothers and babies discharged from hospital before the 14th day, some as early as the 4th day, has kept the Domiciliary Midwives busy. I would particularly mention the special service for the care of the premature infant born and nursed at home. There were 15 of these during the year and all survived the critical first month of life. There was one maternal death—the first recorded in the Borough since 1953. The cause of death in this case was septic abortion.



The attendances at Child Welfare Clinics continue to increase, especially amongst mothers with young babies. More effort must be turned in future years to securing the attendance of the toddler group, for it is at the intermediate ages between one and five years that defects arise which can adversely affect the child's school life. Early recognition and treatment is essential.

For the first time we achieved for a short period our full establishment of health visitors and it appeared that we were going to be able to look more closely at the expanding field of work for this class of officer. Unfortunately we again dropped below establishment in November and our plans had to be modified accordingly. Much remains to be tackled in the field of health education but this is time-consuming and requires positive and energetic direction if it is to accomplish anything.

In the field of immunology pride of place was given to securing the protection of the "Under 40" group against poliomyelitis. Sessions were held outside normal office and working hours to provide opportunity for all to attend. The results were scarcely worth the effort involved but I would especially mention the staff who gave up their free time to organise and run these clinics.

On the other hand the response to B.C.G. vaccination of the 12-14 year group of children exceeded that in previous years, the acceptance rate being 4% higher than in 1959.

The Ambulance Service bore the brunt of an increase in out-patient facilities in the area, 4,123 extra patients being carried—a large proportion of them to the new Psychiatric Department at Billinge Hospital. This, together with the increase mentioned in my last report, threw a great strain on the service as a whole and to maintain our standards it was obvious that an extra vehicle and crew would be required. Provision for this has been made in the Estimates for 1961.

The "Meals on Wheels" previously obtained from the School Meals Service are now cooked by the staff of the Welfare Home. This change, in April, 1960, made it possible to ensure a meal more suited to the fickle palate of an aged person than to the vigorous appetite of a schoolboy but I must pay tribute to the staff of the School Meals Service who have served us well for many years. We must also thank the voluntary workers of the W.V.S., who help in the distribution of the meals.

Notifications of infectious diseases were the lowest ever recorded in the Borough and for the eighth year there was no case of Diphtheria, although this dreadful disease has re-appeared in other parts of the country. There were no cases of Poliomyelitis and only 20 cases of Whooping Cough. Only by sustaining a high level of immunity in the community will this happy state of affairs continue. Notifications of Tuberculosis were again increased in the 45-65 age group of men, a trend on which I commented in my last report. The overall morbidity figures for the year show that there was no particular epidemic of respiratory disease or influenza during the winter months and the graph on page 24 shows the regular pattern of casual illness in an industrialised urban community.



The birth rate continues to rise, 16.52 (15.55) and that of illegitimate births has risen very slightly, 3.36 (3.17), but this is still very much lower than other comparable towns. There were no deaths among these children but the infant mortality rate as a whole was raised to 28.42 (27.73). The still-birth rate was reduced to 19.79 (23.97), thus continuing the trend which has been apparent for several years. The perinatal death rate was slightly reduced 40.32 (40.99). Prematurity and congenital malformations accounted for 68% of the infant deaths. In both of these the diet and exposure to infection of the expectant mother plays a prominent part and although these factors are extremely difficult to control it is in this direction that efforts must be made to improve the infant death rate in the Borough. In this paragraph the figures in parenthesis refer to 1959.

The work of the Sanitary Section is reported by the Chief Public Health Inspector, Mr. J. B. Marsh, and a perusal of the statistics indicates the volume of work which has been devoted to the clearance of unfit houses and to the survey in preparation for the No. 1 Smoke Control Area. Towards the end of the year the staffing position in the section improved and we were able to undertake much of the backlog of work which had accumulated during the previous period of acute shortage of inspectorial staff. The department is sponsoring the training of student public health inspectors and we hope that in the long run this will help to relieve the dearth of these officers in the North West.

In conclusion I must express my thanks to the staff of the Department for their loyal co-operation and for the good work which they have done throughout the year. Similarly to the chief officers and technical advisers of other departments for their help from time to time, and lastly to the Chairman and Members of the Health Committee for the interest and enthusiasm with which they have received the many problems which have been brought to them throughout the year.

J. HAWORTH HILDITCH,

*Medical Officer of Health.*

HEALTH OFFICE,

MUNICIPAL BUILDINGS,

LIBRARY STREET,

WIGAN.

Telephone No. WIGAN 44204.

JULY, 1961.

*Section I*

---

**Natural and  
Social Conditions  
of the Area**

**GENERAL**

Area in acres	....	....	....	....	....	....	....	5,083
Rateable Value of the Borough, 31st December, 1960	....	....						£931,986
Sum Represented by a Penny Rate	....	....	....	....				£3,700
Registrar General's estimated population on 1st July, 1960 (on which figure statistics in this report are based)							....	80,950
Number of inhabited houses on the 31st December, 1960 (according to the Rate books)	....	....	....	....	....			24,621
Number of marriages solemnised within the Borough during 1960								715

The level of prosperity of the town continues and is reflected in the congestion of both pedestrians and vehicles in the vicinity of the shops and market. Much of this has to do with obstruction, caused on one hand by heavy vehicles servicing shops from the main road on the frontage, there being no adequate access at the rear. On the other hand the shoppers are inextricably mixed with the vehicles at busy intersections. Much serious thought has been given in recent months to the re-planning of the main shopping area in an effort to solve these problems in a comprehensive manner and make the best possible use of the land available in the Town Centre.

## *Section II*



# **Statistics**

## VITAL STATISTICS, 1959 - 60

	1959	1960
Area (acres) ....	5,083	5,083
Population (Estimated by Registrar General) ....	81,160	80,950
Live Births : Males 683 } Total		
Females 654 }	1,262	1,337
Rate per 1,000 population ....	15.55	16.52
Illegitimate Live Births per cent. of total live births ....	3.17	3.36
Stillbirths : Number ....	31	27
Rate per 1,000 total live and still births ....	23.97	19.79
Total Live and Still Births ....	1,293	1,364
Infant Deaths (Deaths under 1 year) ....	35	38
Infant Mortality Rates :		
Total Infant Deaths per 1,000 total live births ....	27.73	28.42
Legitimate Infant Deaths per 1,000 legitimate live births	25.35	28.42
Illegitimate Infant Deaths per 1,000 illegitimate live births ....	2.37	—
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births) ....	19.81	23.93
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births) ....	17.43	20.94
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and still births) ....	40.99	40.32
Maternal Mortality (including abortion) :		
Number of Deaths ....	—	1
Rate per 1,000 total live and still births ...	—	0.73
Adjusted Birth Rate per 1,000 Population (Area comparability factor 0.98) ....	15.24	16.19
Ratio of local adjusted rate to national rate....	0.92	0.94
Birth Rate for England and Wales ....	16.5	17.1
Deaths of Infants under 1 day old ....	10	15
Ditto. 1 year (legitimate) ....	32	38
Ditto. 1 year (illegitimate) ....	3	—
Excess of Registered Births over Deaths ....	303	362
Deaths : Males 502 } Total		
Females 473 }	959	975
Death Rate per 1,000 population ....	11.82	12.04
Adjusted Death Rate per 1,000 population (Area comparability factor 1.20) ....	14.30	14.45
Ratio of local adjusted rate to national rate ....	1.23	1.25
Death Rate for England and Wales ....	11.6	11.5
Infantile mortality rate per 1,000 births for England and Wales ....	22.0	21.7



## CAUSES OF DEATH WITH DEATH RATES, 1960

DISEASE							No. of Deaths	Rate
1.	Tuberculosis, Respiratory	...	...	...	...	...	9	.11
2.	Tuberculosis, Other	...	...	...	...	...	—	—
3.	Syphilitic Disease	...	...	...	...	...	1	.01
4.	Diphtheria	...	...	...	...	...	—	—
5.	Whooping Cough	...	...	...	...	...	—	—
6.	Meningococcal Infections	...	...	...	...	...	—	—
7.	Acute Poliomyelitis	...	...	...	...	...	—	—
8.	Measles	...	...	...	...	...	—	—
9.	Other Infective and Parasitic Diseases	...	...	...	...	...	1	.01
10.	Malignant Neoplasm Stomach	...	...	...	...	...	29	.36
11.	„ „ Lung, Bronchus	...	...	...	...	...	41	.50
12.	„ „ Breast	...	...	...	...	...	14	.17
13.	„ „ Uterus	...	...	...	...	...	6	.07
14.	Other Malignant and Lymphatic Neoplasms	...	...	...	...	...	72	.89
15.	Leukaemia, Aleukaemia	...	...	...	...	...	3	.04
16.	Diabetes	...	...	...	...	...	6	.07
17.	Vascular Lesions of Nervous System	...	...	...	...	...	138	1.70
18.	Coronary Disease, Angina	...	...	...	...	...	178	2.19
19.	Hypertension with Heart Disease	...	...	...	...	...	20	.25
20.	Other Heart Disease	...	...	...	...	...	159	1.96
21.	Other Circulatory Disease	...	...	...	...	...	37	.46
22.	Influenza	...	...	...	...	...	1	.01
23.	Pneumonia	...	...	...	...	...	26	.32
24.	Bronchitis	...	...	...	...	...	69	.85
25.	Other Diseases of Respiratory System	...	...	...	...	...	11	.14
26.	Ulcer of Stomach and Duodenum	...	...	...	...	...	10	.12
27.	Gastritis, Enteritis and Diarrhoea	...	...	...	...	...	4	.05
28.	Nephritis and Nephrosis	...	...	...	...	...	5	.06
29.	Hyperplasia of Prostate	...	...	...	...	...	4	.05
30.	Pregnancy, Childbirth, Abortion	...	...	...	...	...	1	.01
31.	Congenital Malformations	...	...	...	...	...	8	.10
32.	Other Defined and Ill-Defined Diseases	...	...	...	...	...	84	1.04
33.	Motor Vehicle Accidents	...	...	...	...	...	11	.14
34.	All Other Accidents	...	...	...	...	...	21	.26
35.	Suicide	...	...	...	...	...	6	.07
36.	Homicide and Operations of War	...	...	...	...	...	—	—
							975	12.04

# REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1960

CAUSES	Sex	All Ages	0 +	1 +	5 +	15 +	25 +	45 +	65 +	75 +
ALL CAUSES ... ..	M. F.	502 473	21 17	1 2	1 —	4 1	25 23	161 106	125 129	164 195
1. Tuberculosis, Respiratory ... ..	M. F.	6 3	— —	— —	— —	— —	— 2	2 1	3 —	1 —
2. Tuberculosis, Other ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
3. Syphilitic Disease ... ..	M. F.	1 —	— —	— —	— —	— —	— —	— —	— —	1 —
4. Diphtheria ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
5. Whooping Cough ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
6. Meningococcal Infections ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
7. Acute Poliomyelitis ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
8. Measles ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
9. Other Infective and Parasitic Diseases ... ..	M. F.	1 —	— —	— —	1 —	— —	— —	— —	— —	— —
10. Malignant Neoplasm, Stomach	M. F.	16 13	— —	— —	— —	— —	— 1	8 3	3 3	5 6
11. Malignant Neoplasm, Lung, Bronchus ... ..	M. F.	38 3	— —	— —	— —	— —	2 —	21 3	13 —	2 —
12. Malignant Neoplasm, Breast	F.	14	—	—	—	—	1	6	4	3
13. Malignant Neoplasm, Uterus	F.	6	—	—	—	—	—	3	3	—
14. Other Malignant and Lymphatic Neoplasms ... ..	M. F.	37 35	— —	— 1	— —	— —	5 1	13 18	8 5	11 10
15. Leukaemia, Aleukaemia ... ..	M. F.	3 —	— —	— —	— —	1 —	1 —	— —	— —	1 —
16. Diabetes ... ..	M. F.	2 4	— —	— —	— —	— —	— 1	— 1	— 1	2 1
17. Vascular Lesions of Nervous System ... ..	M. F.	57 81	— —	— —	— —	— —	2 1	16 9	15 29	24 42
18. Coronary Disease, Angina	M. F.	111 67	— —	— —	— —	— —	4 3	53 23	34 19	20 22



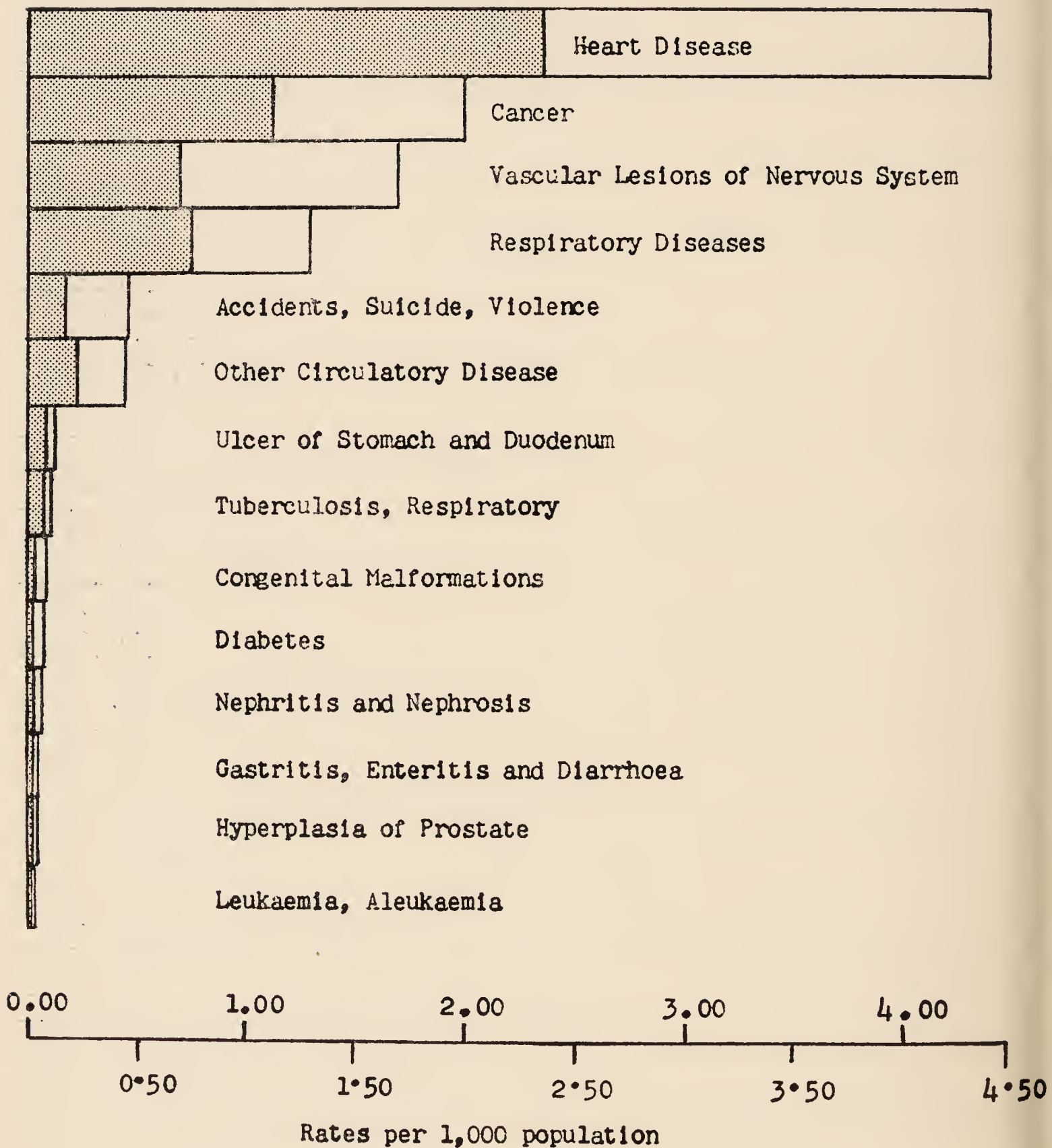
**REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH,**  
**1960—continued**

[illegible]

# PRINCIPAL CAUSES OF DEATHS AT ALL AGES, 1960

SHADED PORTION = MALES

UNSHADED PORTION = FEMALES



### Crude Death Rates for Wigan During the last Ten Years

1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
14.54	13.15	12.02	11.37	11.06	11.02	11.53	11.57	11.07	12.04

### INQUESTS AND UNCERTIFIED DEATHS (Wigan Residents Only)

The number of inquests held during 1960 was 70, and the following verdicts have been recorded :—

1. Natural Causes	....	....	....	....	....	....	30
2. Accidents :							
Falls : Home	....	....	....	....	....	....	9
Road	....	....	....	....	....	....	2
Road	....	....	....	....	....	....	11
Crush Injury—Open-Cast Site	....	....	....	....	....	....	1
Other Home Accidents : Burns	....	....	....	....	....	....	2
Gas	....	....	....	....	....	....	2
Inhalation of Stomach contents							
while asleep	....	....	....	....	....	....	1
Post-operative	....	....	....	....	....	....	2
3. Suicide : Coal Gas	....	....	....	....	....	....	5
Drowning	....	....	....	....	....	....	1
4. Open : Cut Throat	....	....	....	....	....	....	1
Drowning	....	....	....	....	....	....	1
Poisoning	....	....	....	....	....	....	1
Cause Unknown	....	....	....	....	....	....	1
							<hr/> 70 <hr/>

There was no uncertified death in 1960.

## DEATHS FROM CERTAIN RESPIRATORY DISEASES

### Comparative Rates for the Past Five Years

#### Bronchitis

			1956	1957	1958	1959	1960
Deaths ....	....	....	73	79	88	88	69
Rates ....	....	....	0.89	0.97	1.08	1.09	0.85

#### Pneumonia

			1956	1957	1958	1959	1960
Deaths ....	....	....	34	37	38	35	26
Rates ....	....	....	0.41	0.45	0.47	0.43	0.32

#### Pulmonary Tuberculosis

			1956	1957	1958	1959	1960
Deaths ....	....	....	10	13	10	9	9
Rates ....	....	....	0.12	0.16	0.12	0.11	0.11

#### Cancer of the Lung, Bronchus

			1956	1957	1958	1959	1960
Deaths ....	....	....	27	38	27	40	41
Rates ....	....	....	0.33	0.47	0.33	0.49	0.50

#### Other Diseases of Respiratory Organs

			1956	1957	1958	1959	1960
Deaths ....	....	....	18	18	22	21	11
Rates ....	....	....	0.22	0.22	0.27	0.26	0.14

#### Total from All Respiratory Causes

			1956	1957	1958	1959	1960
Deaths ....	....	....	162	185	185	193	156
Rates ....	....	....	1.97	2.27	2.27	2.38	1.92

### CANCER

#### Deaths 1896 - 1960

	No.	Rate		No.	Rate
1896—1900	137	0.44	1931—1935	538	1.28
1901—1905	179	0.53	1936—1940	586	1.42
1906—1910	223	0.49	1941—1945	609	1.54
1911—1915	276	0.61	1946—1950	669	1.59
1916—1920	308	0.72	1951—1955	717	1.72
1921—1925	347	0.76	1956—1960	743	1.82
1926—1930	410	0.93			



# **C A N C E R** **Localisation of Disease, Number of Deaths and Rate per 1,000** **Population Annually for the Past Ten Years.**

	1951		1952		1953		1954		1955		1956		1957		1958		1959		1960	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Uterus... ..	4	.05	12	.14	9	.11	3	.04	5	.06	6	.07	6	.07	7	.09	6	.07	6	.07
Stomach and Duodenum ...	29	.34	29	.35	34	.41	28	.34	17	.21	30	.37	28	.34	33	.41	40	.49	29	.36
Breast ... ..	22	.26	13	.16	20	.24	14	.17	11	.13	17	.21	11	.13	14	.17	11	.14	14	.17
Lung, Bronchus	19	.23	27	.32	29	.35	20	.24	25	.30	27	.33	38	.47	27	.33	40	.49	41	.50
Other Sites ...	81	.96	74	.88	64	.77	57	.69	71	.86	51	.62	52	.64	52	.64	85	1.05	72	.89
Total Deaths from Cancer ...	155	1.84	155	1.85	156	1.88	122	1.48	129	1.56	131	1.60	135	1.65	133	1.64	182	2.24	162	1.99
Total Deaths All Causes ...	1224	14.54	1100	13.15	1001	12.02	944	11.37	915	11.06	905	11.02	942	11.53	941	11.57	959	11.82	975	12.04

## ANALYSIS OF LIVE PREMATURE BIRTHS, 1960

Weight at Birth	Born at Home and Nursed at Home			Born at Home and transferred to Hospital			Born in Hospital			Born in Maternity Home		
	Total	died under 24 hours	survived 28 days	Total	died under 24 hours	survived 28 days	Total	died under 24 hours	survived 28 days	Total	died under 24 hours	survived 28 days
3lbs. 4ozs. or less (1500 gms. or less)	—	—	—	1	—	—	11	7	4	—	—	—
Over 3lbs. 4ozs. up to 4lbs. 6ozs. (1500-2000 gms.)	—	—	—	1	—	1	24	2	21	—	—	—
Over 4lbs. 6ozs. up to 4lbs. 15ozs. (2000-2250 gms.)	3	—	3	1	—	1	17	—	17	—	—	—
Over 4lbs. 15ozs. up to 5lbs. 8ozs. (2250-2500 gms.)	12	—	12	1	—	1	29	2	27	—	—	—
	15	—	15	4	—	3	81	11	69	—	—	—

## INFANTILE AND MATERNAL MORTALITY

### Infantile Mortality

The number of deaths of children under one year is 38, a rate of 28.42 per 1,000 births, and of children over 1 year and under five years 3, or .03 per 1,000 of the population. (In 1959 there were 35 deaths under 1 year, a rate of 27.73 per 1,000).

The deaths occurred as follows :—

HOME :	HOSPITALS :
6	23 Billinge Hospital
	5 Royal Albert Edward Infirmary
	1 Whelley Hospital
	1 Christopher Nursing Home
	1 Duchess of York Hospital, Burnage
	1 Park Hospital, Urmston

Of these, 28, *i.e.*, 73.7% died during the first week of life.

The NEO-NATAL DEATH RATE (deaths per 1,000 live births on or before the 28th day of life) was 23.93. The numbers were :—

	Male	Female	Total
Legitimate ....	17	15	32
Illegitimate ....	—	—	—
	17	15	32
	==	==	==

The STILL-BIRTH RATE for the year is 19.79 compared with 23.97 in 1959 and 30.6 in 1958.

The average rates for the previous 29 years are as follows :—

1931–1940 ....	51.5
1941–1950 ....	37.2
1951–1959 ....	32.43

The PERINATAL RATE for the year is 40.32 compared with 40.99 in 1959 and 43.0 in 1958.

The average rates for the previous 29 years are as follows :—

1931–1940 ....	79.9
1941–1950 ....	58.9
1951–1959 ....	48.3



Dr. I. M. Smith, the Maternity and Child Welfare Officer, comments :—

As against 35 in 1959 the number of infant deaths was 38 and of these 28 died during the first week of life. Premature babies are notably more vulnerable than infants born at term and prematurity was stated as the cause of death in 18 infants, *i.e.*, 47%.

Of full-term infants malformation accounted for 8 deaths, *i.e.*, 21%, and infection for 5 deaths or 13%.

The perinatal death rate is still over 40 and shows little change. The still-birth rate is 19.79, the number of still-born infants showing a steady decline.

### **Maternal Mortality**

There was one maternal death during the year due to septic abortion. This was the first maternal death recorded in the Borough since 1953.

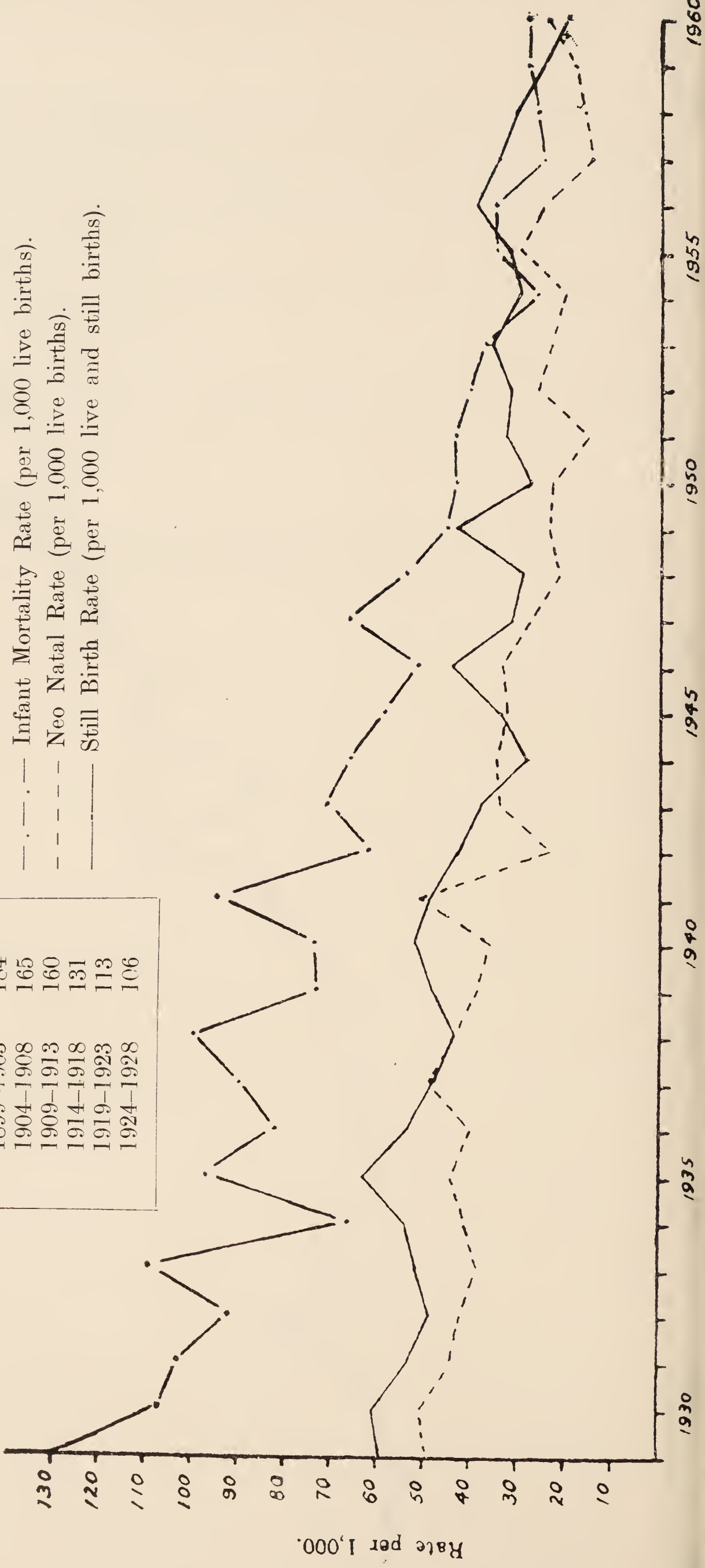
Graph showing the birth rate in the County Borough  
of Wigan for the years, 1874-1960



Infant Mortality Rate  
5-year periods, 1874-1928

1874-1878	200
1879-1883	177
1884-1888	171
1889-1893	184
1894-1898	175
1899-1903	184
1904-1908	165
1909-1913	160
1914-1918	131
1919-1923	113
1924-1928	106

GRAPH showing the INFANT MORTALITY AND STILL BIRTH RATES  
in the County Borough of Wigan for the years 1929-1960



Number of Deaths from Stated Causes at Various Periods  
Under 1 Year of Age

Class No.	CAUSE OF DEATH	Un- der 1 day	1 day	2 Days	3 Days	4 Days	5 Days	6 Days	7- 13 Days	14- 20 Days	21- 28 Days	28 days to 2 mths	2 mths	3 mths	4 mths	5 mths	6 mths	7 mths	8 mths	9 mths	10 mths	11 mths	Total Deaths under 1 yr.
23	Atypical Pneumonia ...	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
	Virus Pneumonia .....	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	2
	Pneumonia with toxaemia, shock .....	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
27	Bronchopneumonia with meningismus, etc. ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
	Ac. Gastro-enteritis .....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
	Congenital heart disease with multiple	—	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	3
31	cong. abnormalities ...	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Spina bifida	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
	with hydrocephalus talipes .....	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
32	Anencephaly	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Interauricular and interventricular septum .....	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Prematurity with atelectasis of lungs .....	9	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11
34	with cerebral haem. ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
	with ante-partum haem. with intra-cran. haem. with acute enceph. ....	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
	Intra-cranial haem.....	—	2	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	2
34	with malpr. at birth ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Atelectasis ... ..	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Hydrops Foetalis .....	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
34	Asphyxia due to regurgi- tation of food .....	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
		15	7	2	3	1	—	—	2	—	2	1	1	—	1	1	1	—	—	1	—	—	38

**MORBIDITY****Wigan Area**

The figures given below, compiled by the local office of the Ministry of National Insurance, indicate the number of persons applying for sickness benefit (first certificate only) week by week during the year 1960.

Jan.	5th	....	781	July	5th	....	428
„	12th	....	726	„	12th	....	288
„	19th	....	703	„	19th	....	408
„	26th	....	718	„	26th	....	480
Feb.	2nd	....	671	Aug.	2nd	....	424
„	9th	....	672	„	9th	....	460
„	16th	....	704	„	16th	....	477
„	23rd	....	774	„	23rd	....	481
Mar.	1st	....	726	Aug.	30th	....	545
„	8th	....	655	Sept.	6th	....	555
„	15th	....	592	„	13th	....	562
„	22nd	....	591	„	20th	....	483
„	29th	....	507	„	27th	....	561
April	5th	....	561	Oct.	4th	....	543
„	12th	....	542	„	11th	....	580
„	19th	....	452	„	18th	....	572
„	26th	....	554	„	25th	....	627
May	3rd	....	515	Nov.	1st	....	622
„	10th	....	499	„	8th	....	640
„	17th	....	577	„	15th	....	601
„	24th	....	468	„	22nd	....	573
„	31st	....	452	Nov.	29th	....	587
June	7th	....	518	Dec.	6th	....	593
„	14th	....	514	„	13th	....	558
„	21st	....	402	„	20th	....	577
„	28th	....	488	„	27th	....	448

Average weekly—558

The average weekly number of persons applying for sickness benefit decreased from 587 in 1959 to 558.

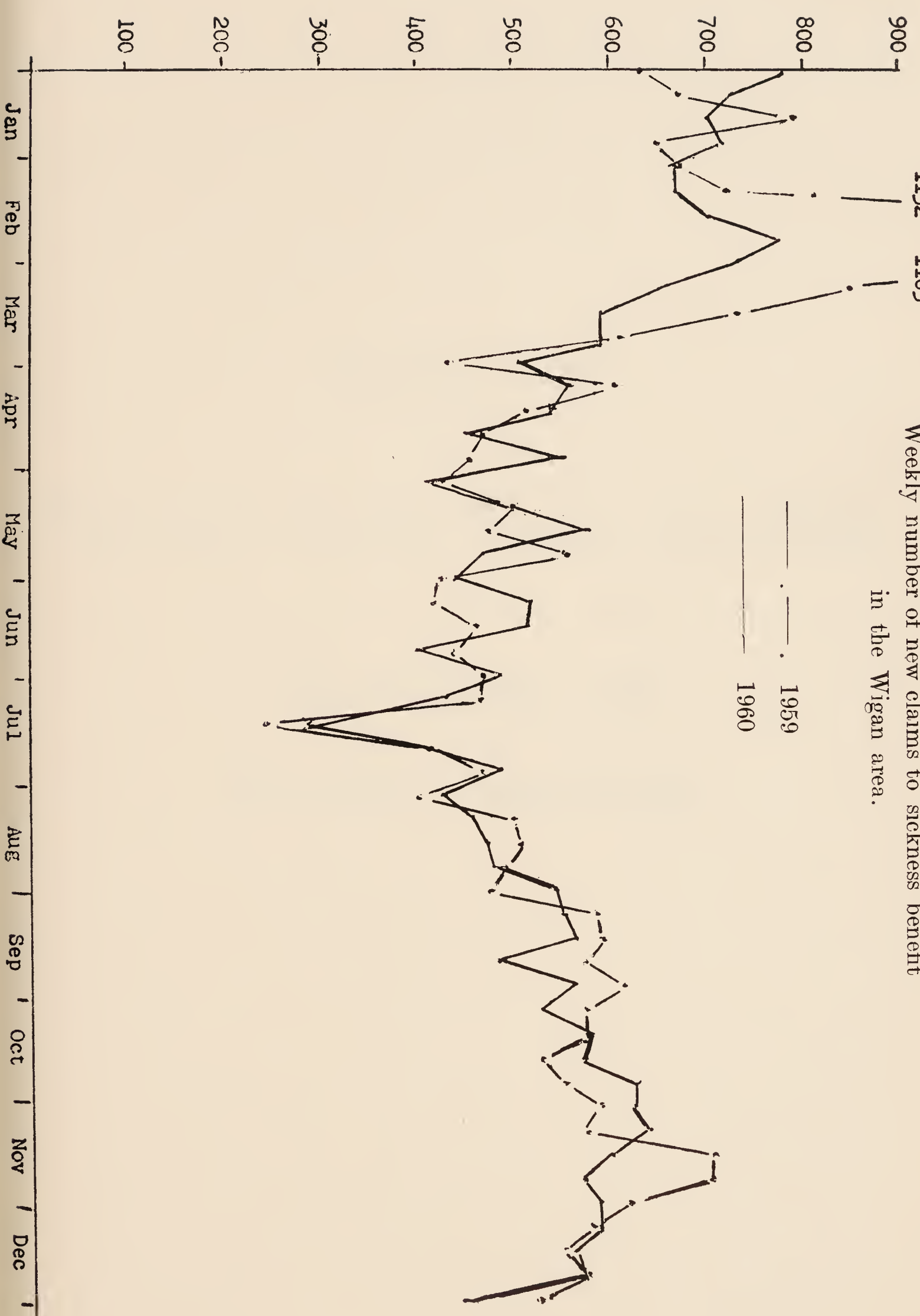


1232

1152 1105

INCIDENCE OF SICKNESS—WORKING POPULATION  
Weekly number of new claims to sickness benefit  
in the Wigan area.

— . — . 1959  
— 1960







*Section III*

---

**National Health Service Act, 1946**

---

**Provision of  
Health Services**

## CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE

The undermentioned Centres are open on the days and at the times stated :—

Centre	Days Open
WIGAN CENTRAL CLINIC, Health Centre, Millgate.	Infant and Young Children's Clinic : Wednesday afternoons, 2 to 4-0 p.m. Ante-Natal Clinic : Tuesdays, 10 a.m. and 2 p.m. A Consultant attends on one Thursday of each month. Post-Natal Clinic : On two Thursdays each month at 2 p.m. Dental Clinic for expectant and nursing mothers and young children : Tuesday and Wednesday mornings. Class for expectant mothers : Friday afternoons at 2 p.m.
PEMBERTON CLINIC : 15, Billinge Road.	Infant and Young Children's Clinic : Monday afternoons, 2 to 4 p.m. Ante-Natal Clinic : Thursday afternoons at 2 p.m. A Consultant attends on one Thursday of each month.
SCHOLES CLINIC : St. Catharine's Mission, Platt Lane.	Infant and Young Children's Clinic : Friday afternoons, 2 to 4 p.m.
WORSLEY MESNES CLINIC : Methodist Church, Poolstock Lane.	Infant and Young Children's Clinic : Wednesday mornings, 10 a.m. to 12 noon.
SPRINGFIELD CLINIC : St. Andrew's Church House, Woodhouse Lane.	Infant and Young Children's Clinic : Tuesday afternoons, 2 to 4 p.m.
LAMBERHEAD GREEN CLINIC : Methodist Church, Fleet Street.	Infant and Young Children's Clinic : Thursday mornings, 10 a.m. to 12 noon.
GOOSE GREEN CLINIC : Methodist Church, Northumberland Street.	Infant and Young Children's Clinic : Thursday afternoons, 2 to 4 p.m.
MARSH GREEN CLINIC : St. Barnabas Church, Scot Lane.	Infant and Young Children's Clinic : Wednesday mornings, 10 a.m. to 12 noon.
ORTHOPAEDIC CLINIC : Health Centre, Millgate.	Open each Monday morning. Surgeon attends twice monthly. Cases from Ince, Hindley and Standish also attend.

## Ante - Natal Care

General practitioners are now booked to undertake the ante-natal care of expectant mothers in more than 96% of home confinements. This is reflected in attendances at the local authority ante-natal clinics. A changing pattern is emerging at the clinics where there is an increasing trend towards the more educational aspect of maternal welfare, including the instruction of mothers in matters relating to the health of themselves and their families and giving them other information designed to develop the best psychological approach to the actual delivery.

## Ante - Natal Clinics

Three ante-natal clinic sessions are held each week—two at the Clinic, Millgate, and one at Billinge Road, Pemberton. An Assistant Medical Officer is present at the sessions and a Consultant attends at each centre one session per month.

	WIGAN CENTRE		PEMBERTON	
	Weekly Clinic	Consultant Clinic	Weekly Clinic	Consultant Clinic
Number of Primary Cases attending Clinic during year	475	4	163	37
Total number of attendances	1813	171	839	241

## Post - Natal Clinics

For post-natal care two sessions per month are held at one centre, each alternate session being attended by a Consultant. Domiciliary cases where no doctor was engaged and cases delivered in hospital may attend for examination. 165 new cases were examined during the year and there were 17 return cases, a total of 182 attendances.

## Care of Expectant Mothers

A mothercraft training and exercise class for expectant primiparae is held at the Central Clinic each week. It is conducted by the Health Visitors. 49 classes were held during the year 1960 and 902 attendances were made by mothers.

Chest x-ray of expectant mothers and the taking of blood samples for testing for the rhesus factor, the Wasserman reaction and the haemoglobin content are all part of the ante-natal care undertaken at Clinics. Iron therapy in the form of Ferrous Gluconate tablets is available and a supply of welfare orange juice, vitamins and welfare foods may also be obtained. Maternity outfits are provided for domestic confinements and are under the charge of the non-medical supervisor of midwives. The midwife engaged is responsible for ensuring that each of the patients receives an outfit.

## Care of Unmarried Mothers

There is one residential home in Wigan for expectant and nursing unmarried mothers. It is under the control of the Liverpool Diocesan Church Council but is not restricted to Church of England members and the local authority pay a substantial amount yearly towards its maintenance. The local health authority clinics are available to the girls and advantage is taken of these facilities. A Health Visitor visits the Home regularly which ensures liaison with the staff.



## Child Welfare Centres

The local authority has eight child welfare centres, at which one clinic is held each week. Each is in charge of a Health Visitor and an Assistant Medical Officer attends the clinic sessions. The total attendances have continued to increase. During the year the numbers of persons attending were as follows :—

CLINIC	Children			Total	Primary Cases	Cases examined by medical attendant	Mothers Attend'g
	under 1 year	over 1 and under 2	2 and under 5				
Central ... ..	2240	369	489	3098	341	1035	2642
Scholes ... ..	1877	516	508	2901	190	917	2472
Pemberton ... ..	1387	264	288	1939	169	726	1693
Worsley Mesnes ... ..	618	221	264	1103	62	235	915
Springfield ... ..	1751	452	329	2532	185	925	2295
Fleet Street ... ..	1105	265	316	1686	125	561	1477
Goose Green ... ..	691	213	301	1214	75	367	1003
Marsh Green ... ..	692	300	368	1360	96	281	1111
	10361	2600	2872	15833	1243	5047	13608

Comparative attendances for the last 5 years :

INFANTS :	1956	1957	1958	1959	1960
Total Attendances ....	12424	13760	14456	15629	15833
Primary Attendances....	1059	1028	1056	994	1243

### EXPECTANT MOTHERS :

#### Central :

Weekly Clinic ....	1662	1555	1744	2029	1813
Consultant Clinic ....	178	231	192	199	171

#### PEMBERTON :

Weekly Clinic ....	744	946	1299	1062	839
Consultant Clinic ....	303	238	197	316	241

No Consultant attends at the child welfare centres but cases are referred from them to the Paediatrician at the Royal Albert Edward Infirmary. A Health Visitor attends the Paediatric Clinic at the Infirmary weekly as liaison officer and adviser on the social aspects of the cases. Cases are also referred to the Infirmary for orthoptic treatment.

Orthopaedic treatment is available at the local authority's clinic in Millgate.



## Distribution of Welfare Foods

A Welfare Foods Shop is situated in the Municipal Buildings and from it welfare foods are distributed.

The quantity of Welfare Foods distributed during the year is shown below :

National Dried Milk	....	....	....	34,150 tins
Orange Juice	....	....	....	51,593 bottles
Cod Liver Oil	....	....	....	6,601 bottles
Vitamin A and D tablets	....	....	....	6,609 packets

In addition the following other commodities were sold at the Welfare Foods Shop and the various Maternity and Child Welfare Clinics :

Proprietary Milks	....	....	....	29,803 packs
Vitamin Supplements	....	....	....	6,685 ,,
Rose Hip Syrup	....	....	....	3,637 ,,
Cereals	....	....	....	4,109 ,,
Malt Extract	....	....	....	1,180 ,,

## Dental Care and Treatment

I am indebted to the Principal School Dental Officer for the following summary of the dental work carried out during the year for the Maternity and Child Welfare Section :—

The arrangements for the dental examination and treatment of expectant mothers and children under school age, for the year under review, has been limited due to staff shortage.

One session each week, however, was allocated for this work and mothers attending the Ante-Natal Clinic were urged to attend for dental inspection. In some cases there was a reluctance to accept dental treatment but advice was given and in other instances there was a favourable response.

In addition to the inspection carried out at The Elms Nursery, children of pre-school age were referred for advice and treatment, by the Assistant Medical Officers and Health Visitors.

### Analysis of Priority Dental Care :

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	141	79	52	41
Children under five ... ..	52	26	20	17

## Forms of Dental Treatment provided :—

	Scalings and Gum Treatmt	Filling	Silver Nitrate Treat- ment	Crowns or Inlays	Extrac- tions	General Anaes- thetics	Dentures provided		Radio gra'phs
							Full Up. or Lr.	Part Up. or Lr.	
Expectant and Nursing Mothers	17	27	—	—	20	—	2	—	—
Children under Five ... ..	6	7	4	—	14	—	—	—	—

In addition to the above, 154 children under five years of age were inspected under the School Dental Service.

**DAY NURSERY**

There is accommodation for 67 children and the nursery is open Monday to Friday, 7 a.m. to 7 p.m.

It is provided primarily for children of mothers who go out to work and also for children whose parents are temporarily unable to care for them. Provision for social cases requiring residential accommodation is made at the Elms Nursery, which is under the control of the Children's Committee.

The average attendances during the year were :

Children under 2 years of age	....	....	....	....	....	17
Children between 2 and 5 years	....	....	....	....	....	41
<b>TOTAL</b>	....	....	....	....	....	<b>58</b>

**Nursery and Child Minders' Regulations Act, 1948**

There are no industrial nurseries in the area but one person is registered as a child minder. Regular visits have been paid by the Department to ensure that the provisions of the Act are complied with.

**FAMILY PLANNING CLINIC**

The Authority was one of the pioneers in the dissemination of information regarding infertility and the spacing of families, and grants the use of the premises in Millgate to the Wigan Branch of the Family Planning Association. An evening session is held once each week and is well attended, the average attendances being 64 per session compared with 58 per session in 1959. This is the highest average attendance figure recorded since the Clinic opened in 1951. For lay staff the Clinic relies on voluntary workers from the Association. In addition specially trained women doctors and nurses are employed at each session. The service, although not in any way advertised in the public press is still increasing in popularity. There were 463 new patients during the year. There is no doubt that the clinic is contributing greatly to the sum of social medicine undertaken by the authority. The professional and voluntary workers deserve the highest praise for their efforts.



## DOMICILIARY MIDWIFERY

The staff employed at the end of the year was one non-medical Supervisor and 11 municipal midwives.

The total number of cases attended by them during the year was 580, compared with 604 in 1959. The average number of cases attended by each was 53. Although the doctor was engaged in 97% of the cases he was present at the delivery of only 4% of the cases engaged.

Booking for confinement in hospital is restricted to certain categories of patients, *i.e.*, where there is some obstetrical abnormality, for primiparae who seek admission, for cases where there is some associated medical condition and for those whose home conditions are unsuitable. The supervisor of midwives visits the homes of all who apply on social grounds and there is good co-operation in this direction between the hospital, the general practitioners and the clinics.

Home confinement continues to be the choice of many mothers and 43% of the births occurred in the patient's own home.

For the purposes of midwifery the town is divided into areas to each of which two or more midwives are allocated. For off duty and holidays they relieve one another within the area as far as possible. This ensures that the patient is unlikely to be attended at her confinement by a midwife who is a complete stranger to her.

Besides attending the cases confined at home the midwives have been called upon to nurse where necessary cases of early discharge from hospital. There were 243 such cases during the year, some of which were discharged as early as 4 days after delivery.

Irrespective of whether the doctor is engaged the midwife must make regular ante-natal visits to her patients and 4,175 such visits were made in 1960. After delivery the midwife attends her patient for the following 14 days and for a longer period if circumstances require it.

The concentrated individual attention which the woman confined at home receives compares very favourably with that given in a busy and often overcrowded maternity hospital.

The midwives are on duty by rota at the ante-natal clinics. This helps to keep them up-to-date in modern methods and also gives them an opportunity of having their clinical findings confirmed.

At the ante-natal clinics samples of blood were taken, 280 for Wasserman reaction, 362 for the Rhesus factor and 805 for haemoglobin estimation.

### Medical Aid

By the rules of the Central Midwives Board, midwives are required to send for medical aid under conditions and for reasons which are specified. Medical aid was summoned in 255 cases, 33 of which were for conditions arising during the ante-natal period. In 152 cases medical advice was sought for the mother alone, in 49 cases for the child alone, and in 54 cases for both mother and child. The general practitioner had been engaged in 234 cases.

## **Analgesia and Anaesthesia**

Both Gas and Air Analgesia and Trilene Analgesia are provided by the Department and all the municipal midwives are qualified to administer them.

The outfits are available at the Clinic and they are transported to and from the homes of the patients by the midwife if she has a car, or by the Ambulance Service.

During the year Gas and Air was administered in 360 cases and in 74 cases Trilene was used.

All the midwives are instructed in the use of Pethidine and it was administered in 298 cases during 1960.

The midwives advise all their patients on the advantages of having analgesia unless it is contra-indicated on medical grounds.

Two midwives attended a refresher course during the year.

The Authority provides district training for pupil midwives taking Part II of the C.M.B. Course. 4 students received training during the year.

## **Transport of Midwives**

Car allowances are made to eight midwives who use their own motor cars whilst on approved duties. They travelled an aggregate of 17,980 miles in the year.

Midwives without motor transport use the Corporation's bus service or the ambulance service.

## **Maternity Homes**

The Christopher Home, administered by the Wigan and Leigh Hospital Management Committee, is the only Nursing or Maternity Home within the Borough. Six beds are available for maternity cases and during the year there were 58 Wigan births in the Home.

## **Ophthalmia Neonatorum**

No case has been notified during the year.

## **Emergency Obstetrical Unit**

By arrangement with the Wigan and Leigh Hospital Management Committee a mobile Obstetrical Unit based on Billinge Hospital is available for cases of obstetrical emergency occurring within the Borough. The unit, composed of an obstetrician and an experienced hospital nurse, along with equipment for blood transfusion, is transported to the home by the Ambulance Service. Two calls were made upon this service during the year, and both had a satisfactory outcome.

## **Care of Premature Infants**

The number of premature infants (*i.e.*, weighing  $5\frac{1}{2}$  lbs. or less at birth) notified during the year was 100; of these 19 were born at home and 81 in hospital.

The early care of premature infants born at home is undertaken by the Supervisor and the midwife engaged for the confinement.



The arrangement is that on receiving information of the birth the Supervisor takes over responsibility for the case and the midwife works under her direction. Visits are paid daily or more often if necessary, special attention being given to the feeding and handling of the baby. Special equipment in the form of draught-proof cots with bedding and hot water bottles, an oxygen resuscitator and baby clothing are provided.

Daily record charts are made out for each infant and these are made available to the doctor attending the cases.

The intensive visiting is continued during the first month or until such time as the baby has attained normal standards. By these means the mother is given every opportunity of learning how to handle and tend the infant.

During the year 26 premature babies received this concentrated attention. The results are very good and fully justify the time devoted to them.

There is a premature baby unit at Billinge Hospital under the control of the Consultant Paediatrician. Close liaison is maintained with the Department, especially when babies are about to be discharged to home and specialised nursing is continued where necessary.

### **Retrolental Fibroplasia**

No case was reported during 1960.

## HEALTH VISITING

Summary of visits during the year 1960 :—

No. of primary visits to births	....	....	....	....	....	....	1,362
„ visits to infants under one year	....	....	....	....	....	....	7,501
„ „ infants over one year and under two years	....	....	....	....	....	....	4,115
„ „ infants over two and under three years	....	....	....	....	....	....	3,342
„ „ infants over three and under four years	....	....	....	....	....	....	2,816
„ „ infants over four and under five years	....	....	....	....	....	....	2,759
„ „ expectant mothers	....	....	....	....	....	....	63
„ „ cases of infectious disease	....	....	....	....	....	....	36
„ „ <i>re</i> deaths under one year	....	....	....	....	....	....	35
„ „ still births	....	....	....	....	....	....	28
„ „ aged persons	....	....	....	....	....	....	423
Other visits	....	....	....	....	....	....	594
No. of visits—no reply	....	....	....	....	....	....	2,023

The establishment of Health Visitors is 10.

There were 10 Health Visitors on the staff until November, when one member left.

The work of the Health Visitor continues to widen in scope and instead of comprising mainly visits to births and the routine visiting of children under 5 years she now advises on health matters pertaining to the whole family.

The old people living alone are especially grateful for her interest and help. The problem families require very frequent visits to help maintain them on an even keel.

The importance of mothercraft is now being increasingly recognised and its teaching is one of the duties of the Health Visitor. During the year, besides the talks at clinics and in the homes a course of 7 lectures was given to the senior girls in five schools. These proved very successful.

Two student Health Visitors from the Bolton Training School received their practical training in the Department. Wigan sponsored one student during the year, and one Health Visitor attended a post-graduate refresher course.

The weekly Out-patient Paediatric Clinic at Wigan Infirmary is attended by a Health Visitor. See page 28.

One Clinic nurse who is an enrolled assistant nurse, gives part-time help in the clinics for minor routine duties.

## THE CHILDREN ACT, 1948

A close liaison exists between the Health Office and the staff of the Children's Department. Weekly visits are made by Assistant Medical Officers of Health to the residential nursery and they are available for consultation and medical examination of all children in the care of the authority.

## **CHILDREN NEGLECTED OR ILL - TREATED IN THEIR OWN HOMES**

The local authority implemented the recommendations contained in circular 78/50 and designated the Medical Officer of Health as the officer responsible for liaison and co-ordination in matters affecting children neglected or ill-treated in their own homes.

The Council also appointed the Chairmen and Vice-Chairmen of the Children's Education, Estates and Health Committees to determine questions of a special nature on the subject of the circular at elected representative level.

During the year it has not been found necessary to call this Committee but many cases have been dealt with at officer level with encouraging results. In particular I would acknowledge the active co-operation of Mr. Hughes of the N.S.P.C.C. and the timely help of the W.V.S. who have assisted with the provision of clothes and bedding on many occasions.

### **PREVENTION OF BREAK - UP OF FAMILIES**

Ministry of Health Circular 27/54 led to a review of those local authority services and personnel who are in a position to see the first signs of family breakdown and who may be able to help. The situation is simplified by the unified control of Health and Welfare Services. Thus there is complete liaison within the Department between the Welfare Services Section and its officers in charge of temporary accommodation, the Assistant Medical Officers of Health, Health Visitors, School Nurses and the Mental Health Services. Friendly co-operation is forthcoming from the Children's Officer and his case workers.

The Day Nursery has also played a part when parents have been unable easily to care for the children for brief periods.

The Home Help Service is involved in this to only a minor degree due to the high incidence of cost which is liable to fall upon the family.

A close liaison is maintained with all local voluntary agencies and officials of government departments who come into contact with cases of child neglect.

### **HOME NURSING**

The Home Nursing Service has continued to function from the Nurses Home, New Market Street, although we have been no more successful in recruiting resident nurses this year than in previous years. Only the Superintendent and her deputy are resident at the present time.

Patients continue to be visited two or three times daily when necessary and a nurse is on duty 6 – 11 p.m. to give sedatives prescribed by the general practitioner and to make the patients comfortable for the night.

Advantage has been taken of the hospital scheme for admitting patients of long standing illness at regular intervals for a period of six weeks thus temporarily relieving relatives.

There has been a fall in the total number of injections given to 30,621 in 1960 compared with 36,437 in 1959. The only significant increases were approximately 50% in the number of injections to cardiac and tuberculous patients.



Over the past five years the number of Home Nursing visits to children has not increased despite the fact that every encouragement is given to Paediatricians and General Practitioners to use the service. The wider use of the domiciliary paediatric nursing service is very much a matter which depends on the outlook of the paediatricians and medical practitioners. In this town there is no shortage of paediatric beds and the prevailing pattern is for domiciliary care to take second place. To this end the re-arrangement and extension of visiting hours to children in hospital has been of considerable help, and a programme is in hand to provide for accommodation in hospital of mothers whose children are in-patients at the hospital.

The fullest co-operation exists between the paediatricians, general practitioners and the Health Department, and there is a full exchange of information regarding sick children prior to their admission to hospital, whilst undergoing treatment and on discharge.

The extra services available, *i.e.*, loan of nursing equipment, laundry service, home help service and "Meals on Wheels" continue to be appreciated by many patients. Doctors make full use of the service and are very co-operative.

During the year the three Ford Popular cars were taken out of service and replaced by four Austin Seven cars. The cars covered 25,534 miles, and the average consumption of petrol was 29.9 miles per gallon.

The Ambulance Service provided drivers for Home Nursing Service cars on 72 occasions for conveying District Nurses. This involved a total of 78 hours 39 minutes.

Bicycles are provided and a maintenance allowance is made if a nurse provides her own autocycle.

The establishment remains as in previous years—one Superintendent, one Deputy Superintendent and eleven nurses, two of whom are male nurses.

The following is a record of work done during 1960:—

No. of cases on the books on 1st January, 1960	....	....	376
No. of new cases during 1960	....	....	1,705
No. of visits paid by the nurses	....	....	47,682
No. of cases ceased to be visited:—			
Now convalescent	....	....	532
Removed to hospital	....	....	257
Deaths	....	....	177
Other reasons	....	....	731
		—	1,697
No. of cases remaining on the books on the 31st December, 1960	....		384

A classification of cases attended during 1960 will be found on pages 37–40.



## Classification of Cases

### Table 1 — All Ages

Tuberculosis of Respiratory System	....	....	....	....	....	....	22
Tuberculosis, other forms	....	....	....	....	....	....	7
Erysipelas	....	....	....	....	....	....	3
Malignant Neoplasms	....	....	....	....	....	....	113
Benign and unspecified neoplasms	....	....	....	....	....	....	45
Diabetes mellitus	....	....	....	....	....	....	38
Vascular lesions affecting central nervous system	....	....	....	....	....	....	148
Conjunctivitis	....	....	....	....	....	....	2
Cataract	....	....	....	....	....	....	1
Acute otitis media	....	....	....	....	....	....	8
Rheumatic Fever	....	....	....	....	....	....	3
Arteriosclerotic and degenerative heart disease	....	....	....	....	....	....	320
Other diseases of circulatory system	....	....	....	....	....	....	163
Tonsillitis	....	....	....	....	....	....	19
Tracheotomy	....	....	....	....	....	....	1
Laryngectomy	....	....	....	....	....	....	1
Influenza	....	....	....	....	....	....	17
Pneumonia	....	....	....	....	....	....	28
Bronchitis	....	....	....	....	....	....	340
Quinsy	....	....	....	....	....	....	7
All other respiratory diseases	....	....	....	....	....	....	60
Appendicitis	....	....	....	....	....	....	8
Hernia of Abdominal Cavity	....	....	....	....	....	....	11
Laparotomy	....	....	....	....	....	....	4
Enteritis	....	....	....	....	....	....	1
Gastrectomy	....	....	....	....	....	....	4
Gastrostomy	....	....	....	....	....	....	1
Resection of Oesophagus	....	....	....	....	....	....	1
Cholecystectomy	....	....	....	....	....	....	18
Diseases of gall bladder and biliary ducts	....	....	....	....	....	....	14
Other diseases of digestive system	....	....	....	....	....	....	26
Diseases of genital organs	....	....	....	....	....	....	14
Prostatectomy	....	....	....	....	....	....	9
Supra-pubic drainage	....	....	....	....	....	....	1
Diseases of uterus	....	....	....	....	....	....	93
Hysterectomy	....	....	....	....	....	....	3
Complications of pregnancy	....	....	....	....	....	....	4
Post caesarian (from 7th day)	....	....	....	....	....	....	2
Post natal	....	.....	....	....	....	....	1
Adrenalectomy	....	....	....	....	....	....	1
Nephrectomy	....	....	....	....	....	....	2
Nephrotomy	....	....	....	....	....	....	1
Miscarriages	....	....	....	....	....	....	1
Threatened miscarriages	....	....	....	....	....	....	1

Infections of the skin :	Boils	....	....	....	....	....	12
	Abscesses :	Breast	....	....	....	....	6
		Others	....	....	....	....	18
	Cellulitis	....	....	....	....	....	3
	Carbuncles	....	....	....	....	....	9
	Eczema	....	....	....	....	....	2
	Dermatitis	....	....	....	....	....	5
	Scabies	....	....	....	....	....	1
	General Rashes	....	....	....	....	....	8
Arthritis and Rheumatism	....	....	....	....	....	....	79
Other conditions :	Constipation, septic areas, bedsores, debility, etc.	....	....	....	....	....	109
Accidents :	Fractures	....	....	....	....	....	18
	Scalds	....	....	....	....	....	10
	Burns	....	....	....	....	....	2
	Injuries due to falling	....	....	....	....	....	11
	Industrial Injuries	....	....	....	....	....	3
Senility	....	....	....	....	....	....	59
Preparation for x-ray	....	....	....	....	....	....	159
Patients dead on nurses' arrival	....	....	....	....	....	....	5

Table 11 — Aged 65 Years and Over

	1960			1959		
	Male	Female	Total	Male	Female	Total
Tuberculosis, respiratory .....	6	—	6	2	—	2
Tuberculosis, other forms .....	1	3	4	—	2	2
Malignant neoplasms.....	19	16	35	21	11	32
Benign and unspecified neoplasms	5	9	14	—	1	1
Diabetes Mellitus .....	5	18	23	2	22	24
Vascular lesions affecting central nervous system .....	33	36	69	21	20	41
Arteriosclerotic and degenerative heart disease .....	101	60	161	60	106	166
Other diseases of circulatory system .....	39	52	91	30	58	88
Diseases of digestive system .....	2	4	6	2	1	3
Influenza .....	—	—	—	2	6	8
Pneumonia .....	6	4	10	5	8	13
Bronchitis .....	60	50	110	40	32	72
Other diseases of respiratory system	5	2	7	4	5	9
Rheumatism .....	1	8	9	—	1	1
Arthritis .....	6	14	20	5	23	28
Varicose ulcers .....	2	8	10	3	9	12
Phlebitis .....	—	1	1	—	—	—
General rashes on body .....	2	1	3	—	—	—
Scabies .....	1	—	1	—	—	—
Cellulitis .....	—	1	1	4	—	4
Abscesses, Boils, Carbuncles .....	3	2	5	13	9	22
Bedsore .....	1	5	6	5	4	9
Senility, Constipation, Debility, Neurasthenia .....	30	53	83	31	42	73
Injuries due to falls .....	1	2	3	2	3	5
Fractures .....	2	10	12	3	6	9
Burns .....	—	—	—	—	1	1
Scalds .....	—	2	2	—	—	—
Supra-pubic drainage .....	1	—	1	2	—	2
Prostatectomy .....	7	—	7	7	—	7
Gastrectomy .....	1	—	1	2	—	2
Hysterectomy .....	—	1	1	—	2	2
Cholecystectomy.....	1	2	3	1	1	3
Diseases of the uterus .....	—	50	50	—	46	46
Preparation for x-ray .....	28	35	53	13	21	34
Cataract .....	—	1	1	—	—	—
Herniotomy .....	3	—	3	1	1	2
Laparotomy .....	1	—	1	1	3	4

### Table III (a) — Children Under 5 Years

[illegible]

### Table III (b) — Schoolchildren

[illegible]

### Table IV — Injection Therapy, 1960

Asthma	Adrenalin	....	....	....	....	....	152
Anaemia	Anahaemin, Imferon, Examin, Hepastab,	}	....	....	....	....	13,208
Neuritis	Riboflavin, Campolon, Forte, Cytamen,						
Rheumatism	Neo-hepatex						
Bronchitis							
Pneumonia	Penicillin	....	....	....	....	....	2,724
Various infections	}	Insulin	....	....	....	....	7,115
Diabetes							
Cardiac							
Cancer	Mersalyl, Mercardon, Thiomerin	....	....	....	....	....	4,488
Catarrh and Chest	Hormones	....	....	....	....	....	120
Trouble	Myocrisin	....	....	....	....	....	101
Tuberculosis	Streptomycin and Dimycin	....	....	....	....	....	1,580
Narcotics and	Morphia, Pethidine, Largactol, Omnipon, Scopolamine, Novocaine and other sedatives	....	....	....	....	....	1,133
Sedatives							
TOTAL							30,621



## NURSING EQUIPMENT

The following equipment is available on loan at a nominal charge :—

Hospital Bedsteads	Lifting Poles
Air Beds	Bed Tables
Air Rings	Rubber sheets
Backrests	Urinals
Bed cradles	Wheelchairs
Bedpans	Crutches

The service is in constant demand and is greatly appreciated.

The scheme was extended to include the loan of enuresis alarms. The machines are supplied mainly to school children on the recommendation of either a School Medical Officer or the Paediatrician at Wigan Infirmary. No charge is made for the loan of the alarms but a nominal fee is levied for the expendable foils which are required for each individual patient. During the year 5 cases were assisted.

### Bedding Loan Service

A service to loan certain articles of bedding for the use of bedfast incontinent persons is available.

The patient is supplied with clean bedding—sheets, drawsheets, pillow cases, pyjama jackets—as required.

The soiled articles are collected for laundering and replaced by clean bedding at regular intervals.

A charge of 6d. per week is made for the service.

No. of cases on 1st January, 1960	....	....	....	....	5
No. of new cases during the year	....	....	....	....	12
No. of cases ceased	....	....	....	....	13
No. of cases on 31st December, 1960	....	....	....	....	4

## VACCINATION

### Small Pox

The following vaccinations were carried out during 1960:—

	Under 1 year	1 year	2-4 yrs. inclusive	5-14 yrs. inclusive	Over 15 yrs.	TOTAL
Primary ....	329	22	11	5	25	392
Re-vaccination	—	—	1	5	41	47
TOTALS ....	329	22	12	10	66	439

329 children under the age of one year were vaccinated during the year. Comparing this figure with the number of births during the same period, it will be seen that only 24.6% of the infants were vaccinated.

### Poliomyelitis

Following the receipt of the Ministry of Health Circular 2/56 the Council approved in principle the scheme for the vaccination of children against poliomyelitis. The original scheme covered children born in the years 1947 to 1954 but this was extended later to include children born between 1943 and 1959, young persons born in the years 1933 to 1942, expectant mothers, and certain classes deemed to be specially exposed to infection—general practitioners

and their families, ambulance staff, etc. In September, 1958, it was decided to offer a third injection in all classes after a period of not less than seven months. On 1st February, 1960, the arrangements were extended to cover all persons under the age of 40 years.

Sessions have been held regularly on Wednesday evenings to provide an opportunity for young adults to attend. Unfortunately, the response has been extremely poor.

During the year 8,485 persons received a third injection and the following vaccinations were completed :—

Children born 1943 to 1960	....	....	....	....	....	1,548
Young persons born 1933—1942	....	....	....	....	....	351
Persons born before 1933	....	....	....	....	....	613
						<hr/>
						2,512
						<hr/>

### B.C.G. Vaccination

Routine protection of thirteen-year-old school children :—

No. in 13 year age group	....	.....	....	....	....	1,460
No. for whom consent was obtained	....	....	....	....	....	1,008
Percentage of acceptances	....	....	....	....	....	69.0
No. of Mantoux-Negative	....	....	....	....	....	825
No. of Mantoux-Positive	....	....	....	....	....	183
Percentage Positive	....	....	....	....	....	18.2
No. Vaccinated	....	....	....	....	....	825
No. who had Chest x-ray	....	....	....	....	....	133
No. where x-ray showed active tuberculosis	....	....	....	....	....	—
No. where x-ray showed lung abnormality requiring further observation	....	....	....	....	....	—

Advantage has been taken of the recent Ministry of Health ruling allowing whole classes to be dealt with, which greatly facilitates the administrative work. As a result a small percentage of the children were aged twelve or fourteen years.

The examination of the vaccination sites revealed no abnormalities. All of those submitted to a post-vaccination skin test had converted to the positive state.

This year's acceptance rate of 69.0% is considerably higher than that for the previous year (64.6%).

The figure for the positive Mantoux tests gives an indication of the extent to which children are being brought into contact with the germ of tuberculosis. Our percentage, 18.2 compares favourably with that in other urban industrial areas, suggesting that Wigan children are not unduly at risk in this respect.

The Chest Physician has supplied the following information regarding B.C.G. vaccination of Tuberculosis Contacts during 1960 :—

Children under 15 years of age :—

No of Contacts			B.C.G.
skin patch tested	Positive	Negative	Vaccinated
196	61	135	130

120 children were patch tested after B.C.G.—all showed a positive skin reaction.

These figures do not include work carried out amongst hospital staff.



## IMMUNISATION

Preventive inoculation against Diphtheria has been offered in the Borough since December, 1936, for children of pre-school and school age. The use of a combined vaccine giving protection against both diphtheria and whooping cough was introduced in the clinics in July, 1954. In January, 1960 it was decided that normally triple antigen would be used to give protection against diphtheria, whooping cough and tetanus by means of a single course of injections. This followed approval being given to offer immunisation against tetanus to persons in the area of the Authority.

Although the local health authority expend time and money on joining in with the national advertising campaigns, the Health Visitor with her personal approach is the spearhead of the drive for a high level of primary protection against Diphtheria and Whooping Cough, while the school nurse is in a unique position to coax the reluctant parent of the primary school child to agree to the child receiving a booster dose of prophylactic.

Inoculations carried out during 1960 :—

### Diphtheria

				M. & C.W. Clinic	School Clinic	Private Doctors	TOTAL
Primary	....	....	....	15	689	5	709
Re-inoculation	....	....	....	10	1557	1	1568
				25	2246	6	2277

### Combined Diphtheria and Whooping Cough

Primary	....	....	....	136	—	43	179
Re-inoculation	....	....	....	56	—	21	77
				192	—	64	256

### Combined Diphtheria, Whooping Cough and Tetanus

Primary	....	....	....	520	1	146	667
---------	------	------	------	-----	---	-----	-----

Born in year	1960	1956-59	1946-55	TOTAL
Estimated present child population immunised against Diphtheria	24%	57%	44%	46%
Estimated present child population immunised against whooping cough	23%	57%	17%	28%

An overall percentage of 46% immunised against Diphtheria cannot be regarded as adequate and we must strive for a figure of at least 80%. Parental apathy is our greatest enemy. Young parents have never seen cases of diphtheria and so the wholesome fear which it engendered in the time of the greatest epidemic incidence has disappeared. Pre-occupation of the medical staff, who have been extensively engaged on other immunological procedures may be to some extent responsible for the relatively unsatisfactory figures to the lower age groups.

## AMBULANCE SERVICE

### Introduction

The increasing use of out-patient departments is reflected in the increase of 4,123 patients carried. A large proportion of these additional patients were conveyed to the psychiatric unit at Billinge Hospital either for E.C.T. Treatment, after-care, consultation or Occupational Therapy on a day care basis. This latter class of patient has thrown great strain on the service at the normal peak period and on occasions necessitates the use of two vehicles.

Year	Average No. of patients carried per mile	Average mileage per patient
1956	0.27	3.6
1957	0.28	3.4
1958	0.33	3.0
1959	0.35	2.9
1960	0.35	2.8

This table gives a clear indication of the operational pattern of the service from 1956.

### Ambulance Station

The Ambulance Service was transferred to temporary accommodation provided by the Transport Department on Sunday, 23rd April for the period of construction of the new Ambulance Station.

### Personnel

The establishment of the Service at the 31st December, 1960 was as follows :—

- 1 Superintendent.
- 1 Assistant Superintendent.
- 1 Clerk Storekeeper.
- 4 Control Assistants.
- 23 Driver/Attendants.
- 1 Handyman.



## Maintenance of Vehicles

All maintenance and repairs necessary to keep the fleet fully serviceable have been carried out satisfactorily.

A replacement for the Austin Hire Car AEK 319 is awaited.

### AGE OF VEHICLES IN YEARS

One to two years	Two to three years	Three to four years	Four to five years	Five to six years	Six to seven years	Seven to eight years	Eight to nine years	Nine to ten years	10 years and over
1	—	1	—	1	1	2	1	1	1

### TOTAL MILEAGE RUN BY EACH VEHICLE

Registered No.	Year of Purchase	Make	Type	MILEAGE		Total Mileage Run
				1959	1960	
AEK 319	1953	Austin	Car	20065	20036	180250
JP 8879	1951	Bedford	Dual Pur.	14819	13662	165593
AEK 432	1953	Bedford	Dual Pur.	15201	16797	122531
AJP 500	1954	Daimler	Ambulance	8565	9021	71347
JP 8800	1950	Bedford	Ambulance	11915	13247	92730
JP 9609	1952	Bedford	Ambulance	14433	13475	150033
BJP 947	1955	Bedford	Ambulance	14120	15922	70481
DEK 828	1957	Bedford	Ambulance	9138	13146	29794
EJP 800	1959	Bedford	Ambulance	4355	11775	16130

## Petrol and Oil Consumption

### PETROL RECEIPTS

Received from Wigan Corporation Transport Department	....	10,076	galls.
Received from Other Authorities	....	13	galls.
<b>TOTAL</b>	....	<b>10,089</b>	<b>galls.</b>

Vehicle	Make	Reg. No.	Mileage	CONSUMPTION		AVERAGE	
				Petrol Galls.	Oil Pints	M.P.G.	M.P.P.
1	Bedford	AEK 432	16,797	1,359	113	12.3	148.6
2	Bedford	JP 9609	13,475	1,013	44	13.3	306.3
3	Daimler	AJP 500	9,021	1,084	25	8.3	360.8
4	Bedford	EJP 800	11,755	961	38	12.5	309.9
5	Bedford	DEK 828	13,146	1,115	70	11.8	187.8
6	Bedford	BJP 947	15,922	1,266	83	12.6	191.8
7	Bedford	JP 8879	13,662	1,056	63	12.9	216.9
8	Bedford	JP 8800	13,247	920	32	14.4	414.0
Car	Austin	AEK 319	20,036	1,315	205	15.2	97.7
<b>TOTALS :</b>			<b>127,081</b>	<b>10,089</b>	<b>673</b>	<b>12.6</b>	<b>188.2</b>

## Summary of Work Undertaken During the Year 1960

CLASSIFICATION	MILES	PATIENTS
SECTION 27 PATIENTS :		
Street Accidents (including all road users) ...	765	225
Other Street Accidents ... ..	258	66
Works Accidents ... ..	379	100
Home Accidents ... ..	671	153
Recreation Accidents ... ..	566	135
Unclassified Injuries ... ..	501	139
Street Illnesses ... ..	278	86
Home Illnesses ... ..	355	69
Works Illnesses ... ..	164	52
Other Illnesses ... ..	243	69
Maternity ... ..	6,748	659
Authorised Officers ... ..	2,436	126
Infectious ... ..	115	23
Deceased ... ..	163	34
Admission, Discharges, Transfers and Clinic Cases	93,703	25,970
Service and Fruitless ... ..	820	—
SECTION 27 PATIENTS—RECOVERABLE :		
Lancashire County Council ... ..	126	15
Other Authorities ... ..	247	19
National Coal Board ... ..	93	15
OTHER RE-CHARGEABLE WORK :		
Welfare Services ... ..	2,968	799
Mentally Sub-normal Children ... ..	14,372	15,428
Midwives and Gas and Air Analgesia ... ..	970	—
TOTALS ... ..	127,081	44,181

## **Radio Telecommunications**

The radio telephone equipment has been regularly serviced and repairs carried out whenever necessary.

The installation has been in constant use since 1953 and a gradual reduction in the operational range and efficiency is taking place.

Arrangements are being made for this equipment to be replaced in 1961.

## **Civil Defence**

The Ambulance and First Aid Section of the division remains active but difficulty is experienced in attracting new members.

One volunteer successfully qualified as a section instructor at the Home Office Civil Defence School, Falfield.



## PREVENTION OF ILLNESS, CARE AND AFTER - CARE

### Health Education

Each month 2,000 copies of the journal "Better Health" are distributed in the district.

Classes for mothers are held each week at the Central Maternity and Child Welfare Centre.

Efforts have continued to inform the general public of the dangers of smoking and particularly the connection between heavy cigarette smoking and lung cancer. Since 1957 the campaign has continued with varying degrees of intensity but it is being fought against overwhelming odds. The best method of giving a lead to older school boys is by example but far too many parents, teachers and doctors are slaves to tobacco. Millions of pounds are spent annually on advertising by the tobacco industry using every possible medium, including T.V. and films. What chance have local authorities to compete with this? One must also ask—How many people are really interested in cutting down smoking? The Government has shown no great enthusiasm in launching an anti-smoking campaign. Only half-hearted attempts have been made—can it be that too much revenue is required from tobacco taxation?

Propaganda regarding Diphtheria immunisation has been carried out in conjunction with the National Campaign.

Special efforts were made during the year to publicise the offer of poliomyelitis vaccination. Poster displays and press advertisements were used.

Efforts are being maintained to bring to the notice of the public, and especially to food handlers, the need for cleanliness and care in the preparation of food.

A course of lectures on Mothercraft was given by the Senior Health Visitor at five Senior Girls' Schools. Seven lectures were given at weekly intervals and the venture was highly successful.

Measures for the dissemination of information to the public are being developed. They include the publication of literature, displays of posters, etc., and opportunities are taken to give lectures on various health subjects from time to time. Lack of suitably qualified personnel is the limiting factor at the present time.

Subscriptions are paid each year by the Borough Council to the Central Council for Health Education and the Royal Society for the Prevention of Accidents. This enables us to receive from the two organisations much valuable help and information as to the best methods of approaching the public.

### Convalescence

During the year 1960 arrangements were made for short-term care for one child under Section 28 of the National Health Service Act, 1946.



## Venereal Disease

The treatment of Venereal Diseases is the responsibility of the Hospital service, and in Wigan the Clinic is under the direction of Dr. Philip S. Silver, M.R.C.S., L.R.C.P.

### NO. OF WIGAN CASES DEALT WITH FOR THE FIRST TIME AT THE V.D.

	TREATMENT CENTRES									
	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Syphilis	23	11	4	11	12	7	8	7	3	5
Gonorrhoea	9	9	13	10	13	10	6	14	8	12
Other Conditions	62	41	59	36	39	37	31	43	32	54
<b>TOTAL</b> ....	<b>94</b>	<b>61</b>	<b>76</b>	<b>57</b>	<b>64</b>	<b>54</b>	<b>45</b>	<b>64</b>	<b>43</b>	<b>71</b>

The Health Committee have continued their arrangements whereby the V.D. Orderly of the Royal Albert Edward Infirmary undertakes the duties of Almoner.

Efforts are made to persuade persons who are a source of infection to attend for treatment at the Centre. Contact is made with patients who fail to attend for treatment with a view to stressing the importance of continued attendance at the Clinic. The work done by the Almoner has been found to produce satisfactory results.

The following is an extract from the Almoner's report for the year 1960 :—  
Total number of contacts persuaded to attend were :—

	Male	Female
Syphilis ....	4	1
Gonorrhoea ....	1	2

Patients failing to attend for treatment are the biggest problem and 50 letters were sent to try and persuade them to attend. Of these 43 reported for further investigation and treatment.

## Tuberculosis

Statistical information regarding the prevalence of and mortality from tuberculosis will be found in that section of the Report dealing with infectious diseases.

The Tuberculosis Visitor is a full-time member of the Local Authority Health Visiting Staff, the work of the health visitor being divided between attendance with the Chest Physician at the Dispensary and visiting patients in their homes.

During the year, 1,864 home visits were paid by the tuberculosis health visitor.

The number of new contacts examined during the past three years was as follows :—

1958			1959			1960		
Adults	Children	Total	Adults	Children	Total	Adults	Children	Total
79	104	183	101	138	239	116	127	243

Contacts of positive cases under supervision, 31st December, 1960 .... 362

Contacts under supervision after B.C.G. inoculation .... 422

The average number of contacts per case of pulmonary T.B. is as follows :—

	1958	1959	1960
Tuberculosis Notifications: Pulmonary ....	36	56	50
Other forms ....	9	9	3
No. of contacts per case (pulmonary only) ....	5.1	4.3	4.9

All cases of death from respiratory tuberculosis which remained un-notified during life are the subject of special contact investigations.

The responsibility of the Council for providing care and after-care services at present is being discharged through a voluntary Care Committee. The aims of this Committee may be stated as follows :—

1. To provide extra nourishments, nursing utensils, wheel chairs, etc.
2. To help in providing extra clothing needed by the patients, especially when they go into sanatorium and on their return home.
3. To visit and give friendly advice.
4. To assist in educating public opinion in matters of health in regard to Tuberculosis.
5. To give assistance in providing tools in cases where tuberculous persons entering into employment are not so assisted by the Ministry of Labour.

The Chest Physician acts as Honorary Medical Officer to this Committee.

During the year arrangements were continued for organised classes in all manner of light craft work and sewing. These were well attended and should form a prominent feature of the work of the Committee in the future, although we lack a suitable building where fixed equipment can be erected.

## Housing of Tuberculous Cases

In appropriate cases recommendations for re-housing are made when adequate isolation cannot be ensured where there is a case of Infectious Tuberculosis. Visits were paid to a large number of dwellings following reports of suspected tuberculosis and a thorough investigation was carried out in each case, but no cases were re-housed during 1960.

In every instance contact was made with the Consultant Chest Physician who gave every assistance in arriving at a decision as to the degree of priority to be given in each case submitted to the Committee.

## Rehabilitation

Very few known sputum positive cases are actually employed in permanent positions, and constant supervision by the Tuberculosis Health Visitor ensures that these few do not become a danger to other susceptible groups.

Persons who are fit for light work are referred to the Disablement Re-settlement Officer with suitable recommendation.

Patients have been admitted for training and colonization at Barrowmore Hall, the local health authority undertaking part maintenance.



## **Bacille Calmette Guerin Vaccination**

Full information concerning B.C.G. vaccination of contacts and school leavers is given on page 42.

## **Mental Disorder**

Details of work under this section are given under Mental Health Service. Page 56.

## **Other Illnesses**

Close liaison between the health visitors and the social welfare officers engaged on work amongst the physically handicapped under the Council's scheme ensures that advice and help are readily available to those in need once their condition becomes known to the Department.

## **Meals on Wheels Service**

A Scheme (within the Council's proposals under Section 28 of the National Health Service Act, 1946) for the delivery of a mid-day meal to individuals unable, because of illness or physical disability to provide their own has been in operation since May, 1951.

The meals were previously supplied by the School Meals Service but since 14th April, 1960 they have been prepared at the Welfare Home, Frog Lane.

The food is served in individual covered containers. The charge per meal is 1s. 4d., but in necessitous cases it is reduced to 1s.

9,967 meals were provided on 258 days during the year.

A maximum of three meals per week are provided in each case and the service is greatly appreciated.

Besides its value in preventing malnutrition, a regular visit by an interested voluntary worker and a member of the staff of the Department has a beneficial effect on the morale of the recipients who feel they are not forgotten and can ask for help if they require it. In this connection I must recognise the valuable work done by the members of the W.V.S., who regularly accompany the drivers and deliver the meals.

## DOMESTIC HELP SERVICE

Two helps are employed full time and at the end of the year 86 part-time helps were on the register.

Again there has been a considerable increase in the number of families availing themselves of the Service. During 1960 domestic help was provided in 813 cases—46 maternity, 10 tuberculous, 736 chronic sick including aged and infirm and 21 others—compared with a total of 790 in 1959.

The Organiser has a Visitor and a part-time clerk to assist in the organisation of the Service.

### Charges for Service

The standard charge operating during the year was 3s. 9d. per hour but in very few cases was the recipient called upon to pay the full cost. All cases whose family income is such that they must ask for relief are assessed according to a scale agreed by the Health Committee. The aged and chronic sick form the bulk of the cases helped by the Service.

The Home Help, Meals on Wheels and the Bedding Loan Service still form the backbone of the Department's effort to maintain the aged in their own homes and so relieve the pressure on Part III Hostel beds. The rising expenditure on these services must, therefore, be looked upon as an economy in the long run.



## MENTAL HEALTH SERVICES

The year 1960 will be remembered as the beginning of a new era in the provision of Mental Health Services. Revised proposals for Local Authority Services were approved and brought into operation, and on the 1st November, 1960, the main provisions of the Mental Health Act, 1959 became operative.

Following the Report of the Royal Commission on Mental Health the trend towards the informal admission of patients to hospital had developed and greater emphasis was being placed on community care. From 1st November, 1960, new procedures for compulsory admission to hospital were introduced to replace those existing under the old legislation. Co-operation between the General Practitioner, Hospital Services and the Local Health Authority has always been necessary in the Mental Health field—it now becomes essential if the new procedures are to work satisfactorily.

The revised proposals for the care and after-care of Mentally Disordered persons now provide for these services under Section 28 of the National Health Service Act, 1946. An adequate number of Junior Training Centre places exists at Hope School and on 28th April, 1960, an Adult Training Centre opened in premises formerly used as Marylebone School. This Centre is being used as a temporary measure prior to the opening of a purpose-built centre for which plans are now being prepared. The new proposals also enable the authority to provide residential accommodation for mentally disordered persons. A scheme for a hostel to accommodate up to six persons is at present under consideration and this will be proceeded with when the need arises. In the meantime Mental Welfare Officers continue their normal case work and community care activities. These are services which must be encouraged to grow and develop gradually and every care is being taken to ensure that this takes place.

### Administration

The Health Committee is responsible for the control of this service and the Medical Officer of Health is the Executive Officer.

During the year the establishment was varied to provide one Senior Mental Welfare Officer and three Mental Welfare Officers.

With the introduction of the new procedures for hospital admission it became necessary to approve a number of Medical Practitioners under Section 28 (2) of the Mental Health Act, 1959, for the purpose of making medical recommendations in respect of mentally disordered patients—the Medical Officer of Health, Dr. R. McL. Bain, Dr. H. Coates, Dr. S. M. A. Malik and Dr. D. M. Mather have been approved for this purpose.

### Mental Subnormality

At the end of the year a total of 119 mentally subnormal persons were under the care of the local authority, 73 of these being severely subnormal. Regular home visits are made and in addition to giving advice to the families a great deal of effort is made by the Mental Welfare Officers to help seek employment in suitable cases.

During the year two youths were discharged from the Royal Albert Hospital, Lancaster. One was admitted to Marylebone Training Centre and the other is now in regular employment.

The difficulty in obtaining hospital care is still a pressing problem. It has, however, been possible to obtain short term care in four cases, which has given relief to the parents. In addition arrangements were made for one person to be admitted to a local authority hostel.

## **Mental Illness**

The department continues to deal with all matters relating to prevention, care and after-care of persons suffering from mental illness. After the 1st November, 1960, when the new admission procedures under the Mental Health Act, 1959 became operative, there was no immediate apparent change in the pattern of the service. The trend towards informal admission to hospital continues and in this and all other aspects of the service the co-operation with Hospital Consultants and General Practitioners is invaluable.

Close contact is maintained with patients in hospital. Mental Welfare Officers visit patients in Billinge Hospital regularly and where necessary maintain contact with the home and see that the patient's domestic arrangements are properly protected. Many problems of housing, financial stress and marital difficulties are tackled whilst the patient is in hospital, thus easing his return to the community. This, together with the regular discussion regarding all aspects of the patients' welfare at the Case Conferences, has done much to bridge the gap between the patient in hospital and his after-care in the community.

Mental Welfare Officers maintain a 24-hour "on call" service for arranging urgent admissions to hospital. The Senior Mental Welfare Officer attends the psychiatric clinic each week at Wigan Infirmary and obtains the social history in respect of all patients attending from the County Borough of Wigan. Where necessary a Mental Welfare Officer accompanies the patient to the clinic.

## **Prevention**

Many cases of potential breakdown are referred to the department and it has been found that a satisfactory solution of social problems has been instrumental in averting mental illness.

A close liaison exists between the medical practitioners and mental health staff in dealing with stresses and situations within the family at an early stage. Considerable success is being achieved without the need for admission to hospital and many patients continue to lead a useful life in the community whilst receiving out-patient treatment and supportive case-work from the mental health staff.

Every effort is made to secure the closest co-operation between the mental health staff and other social workers including welfare officers, health visitors, child care officers, probation officers and officers of the housing department.

Help has also been received from some voluntary associations, particularly the W.V.S., who have given great help with clothing, and the Rotary Club of Wigan.



## After Care

Close liaison is maintained with the hospitals and the mental health staff attend weekly conferences with the Consultant Psychiatrist to the Wigan area when all matters relating to the welfare of the patients are discussed. These sessions are held at Billinge Hospital, and have proved to be of particular benefit in formulating after-care measures at an early stage and thereby facilitating the return of the patient to the community.

All patients on discharge from hospital are visited by the case-worker, and every endeavour is made to obtain the co-operation of the relatives and help them to understand the patients' difficulties. Patients are encouraged to keep their appointments at the after-care clinic at Billinge Hospital where necessary.

The department co-operates with the Ministry of Labour and employers in cases where the question of employment arises.

## Account of Work Undertaken in the Community

Visits to the office by relatives and patients for advice	....	....	260
---	------	------	-----

### MENTAL ILLNESS :

#### Lunacy and Mental Treatment Acts:

Patients notified	....	....	....	....	....	....	....	54
-------------------	------	------	------	------	------	------	------	----

#### Dealt with as follows :

Section 26, Lunacy Act, 1890	....	....	....	....	....	Nil.
Section 20, Lunacy Act, 1890	....	....	....	....	....	33
Section 21, Lunacy Act, 1890	....	....	....	....	....	19
Voluntary Patients, Section 1, Mental Treatment Act, 1930	....					2
						<hr/> 54 <hr/>

#### Patients admitted under Sections 20 and 21, Lunacy Act, 1890, dealt with as follows :

Section 16, Lunacy Act, 1890	....	....	....	....	....	3
Transferred to informal status	....	....	....	....	....	46
Discharged following expiration of order	....	....	....	....	....	1
Died	....	....	....	....	....	2

### Mental Health Act, 1959 :

Patients notified	....	....	....	....	....	....	81
-------------------	------	------	------	------	------	------	----

#### Dealt with as follows :

Section 25, Mental Health Act, 1959	....	....	....	....	3
Section 26, Mental Health Act, 1959	....	....	....	....	1
Section 29, Mental Health Act, 1959	....	....	....	....	3
Section 60, Mental Health Act, 1959	....	....	....	....	1
Informal admissions, Mental Health Act, 1959	....	....	....	....	73
					<hr/> 81 <hr/>

Patients admitted under Sections 25, 26, 29 and 60, Mental Health Act, 1959 :

Transferred to Informal status	4
Discharged following expiration of application	2
Still in hospital under Section 26	1
Still in hospital under Section 60	1
No. of patients visited under Section 28, National Health Service Act, 1946....	190
No. of visits under Section 28, National Health Service Act, 1946	601
Social Histories for Hospitals and Psychiatric Clinics	218
No. of Patients discharged from Section 16, Lunacy Act and re-admitted to hospital as Informal Patients	64
No. of Patients in hospital at 31-12-60—Informal Patients	155
Detained under provisions of Mental Health, 1959	86
Deaths	18
No. of Patients notified as requiring After-Care on discharge	96

MENTAL SUBNORMALITY :

No. of Patients in psychiatric hospitals at 31-12-60	82
No. of Patients in special hospital accommodation	6
No. of Patients under Community Care at 31-12-60	109
No. of Patients at Junior Training Centre	47
No. of Patients at Adult Training Centre	7
No. of Patients at Special Care Unit	5
Petitions presented, Section 5, Mental Deficiency Act, 1913	1

Patients admitted to hospitals :

Section 3, Mental Deficiency Act, 1913	Nil.
Section 8, Mental Deficiency Act, 1913	1
Section 9, Mental Deficiency Act, 1913	Nil.
Informal admissions Mental Health Act, 1959	4

Short term care, Section 28, National Health Service Act, 1946 :

Admitted to National Health Service hospitals	4
Admitted to other accommodation	1
Special reports made on behalf of hospitals	28
Home visits	460

Particulars of cases reported during the period 1-1-60—31-10-60 :

(a) Cases reported by the Local Education Authority under Section 57, Education Act, 1944	6
(i) Under Section 57, (3) Education Act, 1944	6
(ii) Under Section 57, (5) Educational Act, 1944 :	
On leaving ordinary schools	1
On leaving special schools	3
(b) Other ascertained defectives	3

Disposal of cases reported during the period 1-1-60—31-10-60 :

Placed under statutory supervision	10
Placed under voluntary supervision	1
Admitted to hospital	2
No. who ceased to be under care	1
Died or removed from area	4
Cases awaiting admission to hospital at 31-12-60 (excluding those in Special Hospital Accommodation)	3



## TRAINING OF THE MENTALLY HANDICAPPED

---

### TRAINING CENTRE, HOPE SCHOOL

- Terms :** The Centre is open on all normal school days.
- Staff :** Supervisor.  
Deputy Supervisor.  
Four Female Assistant Supervisors.  
One Trainee Supervisor.  
One full-time guide help.  
One part-time guide help (17½ hours per week).  
One caretaker.  
We are very fortunate in having the services of a voluntary helper one day per week who helps generally and teaches the senior girls cookery. This has proved an item of real interest to the girls.
- Transport :** The children from Wigan Borough and from the Standish area are still conveyed by ambulance but the remainder from the Lancashire County No. 8 Division are brought in by coach.
- Meals :** A mid-day meal is provided on school days. This is cooked and conveyed to the Centre by the School Meals Service. The cost to the children is 1/- per meal.
- School Milk :** All children under the age of 16 years have received one-third pint of pasteurised milk daily.
- Medical and Dental Services :** The following services are provided, either directly or through the School Health Service: Inspection on entry and routine medical inspection (this includes re-assessment of mental ability and actual progress made from time to time); cleanliness inspections; dental treatment; minor ailment treatment (a school nurse attends twice weekly for dressings).
- Curriculum :** Instruction has been given in the following subjects :—  
     **Infants :** Speech training;  
                   Sense training;  
                   Percussion band, singing;  
                   Music and movement, physical training, simple folk dancing;  
                   Personal hygiene and habit training.

In addition the junior boys do handwork, and gardening and the junior girls do handwork and simple domestic duties.

The senior girls do hand loom weaving, needlework, country dancing and receive instruction in all domestic duties and housecraft. The domestic work of the senior girls' class is now quite good. The cookery class is popular and the results look good.

Certain of the children are taught numbers, letters, telling the time, money values, etc.

The work of the school is progressing steadily. The children are happy ; they are becoming more controlled in behaviour and bearing and many of the seniors are more self-reliant. There are of course, some children who are so unstable and aggressive that they require much training and the staff need infinite patience to deal with them.

The percussion band groups are greatly enjoyed and the standard of pattern playing is steadily improving.

Because of shortage of working space in the Senior Boys workshop the male Assistant Supervisor with eleven senior boys transferred to an adult centre in premises formerly known as Marylebone School. The classes were then re-organised and with the exception of the senior girls class the school is co-educational. The new entrants to fill the eleven vacancies were mostly in the infant group.

### Other Activities

In June the children were taken to an afternoon performance at the Tower Circus, Blackpool.

Once again we are indebted to Mr. H. Jackson, Coach Proprietor, of Spring View, Ince, who kindly provided transport for the children to tour Blackpool Illuminations.

### Training of Students

At the beginning of the Spring term a young female trainee joined the staff. It is hoped that she will eventually attend a National Association for Mental Health Course for Teachers of the Mentally Handicapped and qualify for a Diploma. During the year two students from the National Association for Mental Health Training Course for Supervisors in Manchester have done practical training in the Centre.

Ages of children attending the Centre during the year :—

	7	8	9	10	11	12	13	14	15	16-30	Total
M. ....	1	1	1	1	2	4	2	1	5	9	27
F. ....	2	2	1	2	1	2	2	6	1	19	38

The following is an extract from the attendance register :—

	Borough.	County.	Total.
No. of children on the register at 1st Jan., 1960	41	24	65
No. of admissions during the year	14	1	15
No. of children ceased to attend	8	7	15
No. of children remaining on the register at 31st December, 1960	47	18	65
Average daily attendance during the year	35	17	52



## MARYLEBONE TRAINING CENTRE

Marylebone Training Centre for Adult Male Trainees opened on 28th April, 1960. The Centre is housed in premises formerly known as Marylebone School to which certain adaptations had been carried out. Some internal decorations had been done but the trainees themselves were left to complete the work and also make some of the furniture for use at the Centre. Initially eleven senior trainees from Hope School were transferred under the supervision of Mr. E. Hilton, who also transferred from Hope School to become Senior Craft Instructor at the new Centre. The aim at Marylebone is to assimilate as near as possible the conditions in open employment. The centre is open from 9 a.m. to 5 p.m. Monday to Friday inclusive and closes only on three weeks each year in addition to Public Holidays. During the year another Craft Instructor was appointed and at the end of the year a total of 13 trainees were attending.

Whilst at Hope School the trainees had been engaged mainly on carpentry and this was continued at Marylebone. The standard of work achieved is very high and is due in no small measure to the work of Mr. Hilton. It is hoped to introduce other types of work during 1961.

Initially all the trainees are being transported to the centre but plans are being made for some of them to travel by public transport when this can be arranged.

A mid-day meal is usually provided through the School Meals Service but during holidays when this service is not available the meals are prepared at Douglas Bank House.

The centre is used by Borough and County Trainees and details of attendances during 1960 are given below.

	Borough.	County.	Total.
Number of trainees on register at 28th April, 1960	6	5	11
Number of admissions during 1960      ....      ....	1	1	2
Number of trainees ceasing to attend      ....      ....	—	—	—
Number of trainees on register at 31st Dec., 1960	7	6	13
Average attendance during the year      ....      ....	6	5	11

## SPECIAL CARE UNIT

Facilities are provided at Scarisbrick Street Baptist Church to ease the burden of parents of mentally defective children who are too young or too low grade to benefit by instruction in the Training Centre and also to enable the mother to attend shopping and other outdoor matters.

The unit is open Tuesday, Wednesday, Thursday and Friday afternoons each week between 1-30 and 4-30. Between 4 and 6 children regularly attend and are under the care of two paid helpers. No charge is made to the parents of children attending.

## CO-ORDINATION OF HEALTH SERVICES

No changes have been found necessary during the year in the machinery for co-ordination of the three branches of the Health Services in this area.

There is plenty of good will at all levels and the Liaison Committee mentioned in my earlier reports has held regular meetings. Items for discussion included :—

Child Guidance Clinic.

Central Syringe Service.

Ambulance Service.

Discharge of Maternity Patients.

Major Accident Organisation.

Foster Home for Old People.

### Major Accident Organisation

In the event of a major catastrophe it is essential that all those officers and services who will inevitably be involved shall be aware of the resources, commitments and liabilities of each other and that pre-arranged conventions governing the alerting of the services shall be widely known. To achieve this the co-operation of ambulance, fire, hospital, police and welfare services, both statutory and voluntary, in the County Borough and the surrounding area have been obtained. The Department has published in booklet form, comprehensive schemes drawn up and co-ordinated by officers of the various authorities involved. These schemes are reviewed annually and amendments made in the light of experience.



*Section IV*

---

**Prevalence of  
and  
Control over  
Infectious Disease**

## PREVALENCE AND CONTROL OF INFECTIOUS DISEASES

There were 41 notified cases of Measles, more than half occurring in the months of November and December.

The number of cases of Pulmonary Tuberculosis notified was 50 compared with 56 in 1959.

20 cases of Whooping Cough were notified.

47 cases of Scarlet Fever were notified, 29 of which occurred in the 5-10 age group.

For the eighth year in succession there was no notified case of Diphtheria.

No cases of Paralytic Poliomyelitis were notified.

The total of 176 is the lowest number of infectious diseases in a twelve monthly period yet recorded.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1960.

NOTIFIABLE DISEASE	CASES NOTIFIED																						
	AGE GROUPS							WARD RESIDENCE															
	under 1	1 and under 3	3 and under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and over	St. George	Lindsay	St. Cath.	4 St. Patrick	9 St. Thomas	6 Poolstock	7 Victoria	8 St. Andrew	9 Swinley	10 All Saints	11 West Pem.	12 North Pem.	13 Central Pem	14 South Pem.
At all Ages	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Encephalitis, Infective	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis: Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Memb. Group	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ... ..	2	1	1	2	—	—	—	2	—	—	3	—	—	—	1	—	—	1	—	2	1	—	—
Enteric or Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria (contracted abroad)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ... ..	1	15	12	12	1	1	—	—	—	—	3	3	—	2	3	5	2	8	1	4	6	1	3
Meningococcal Infection ...	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ... ..	—	6	7	29	5	—	—	—	—	—	—	1	3	1	—	3	5	12	—	4	8	4	7
Tuberculosis: Pulmonary	—	—	1	—	2	11	14	14	8	—	1	3	10	—	3	3	9	4	—	6	3	4	3
Other Forms	—	—	1	—	—	—	2	—	—	—	—	—	1	—	1	—	—	—	—	—	1	—	—
Whooping Cough ... ..	5	6	4	5	—	—	—	—	—	3	—	3	1	—	2	—	5	—	2	—	3	—	—
TOTALS...	9	29	26	48	8	14	17	16	9	7	7	10	15	3	10	9	21	26	3	16	24	12	13



### Analysis of Notifications by Months, 1960

DISEASE	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Totals
Acute Encephalitis : Infective ...	—	—	—	—	—	—	—	—	—	1	—	—	1
Acute Poliomyelitis : Paralytic ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-Paralytic ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Memb. Croup ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	1	2	—	2	2	—	—	—	—	—	1	—	8
Enteric or Typhoid Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	1	—	—	—	—	—	—	—	—	—	—	1	2
Food Poisoning ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria (contracted abroad) ...	—	1	—	—	—	—	—	—	—	—	—	—	1
Measles ...	2	—	1	—	—	1	4	3	1	2	11	16	41
Meningococcal Infection ...	—	1	—	—	—	—	—	—	—	—	—	—	1
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	—	—	1	—	—	—	—	—	—	—	1	—	2
Puerperal Pyrexia ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever... ..	5	6	3	4	5	2	1	—	—	9	6	6	47
Tuberculosis : Pulmonary ...	2	—	5	3	5	5	7	4	6	4	4	5	50
Other Forms ...	1	—	—	—	—	—	—	2	—	—	—	—	3
Whooping Cough ...	—	2	2	3	3	2	5	1	1	1	—	—	20
	12	12	12	12	15	10	17	10	8	17	23	28	176

### Comparative Notifications for the Past Ten Years

DISEASE	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Acute Encephalitis : Infective ...	—	—	—	—	—	—	—	1	—	1
Acute Poliomyelitis: Paralytic ...	—	2	5	—	1	—	5	1	3	—
Non-Paralytic ...	2	1	1	—	2	3	1	1	—	—
Diphtheria and Memb. Croup ...	1	2	—	—	—	—	—	—	—	—
Dysentery ...	7	1	1	106	9	64	63	9	12	8
Enteric or Typhoid Fever ...	—	—	2	—	—	—	1	—	—	—
Erysipelas ...	3	9	8	5	4	3	—	3	1	2
Food Poisoning ...	—	—	3	1	3	14	8	6	4	—
Malaria (contracted abroad) ...	—	—	—	—	—	—	—	—	—	1
Measles ...	1059	539	1219	271	1400	96	721	582	488	41
Meningococcal Infection ...	3	—	—	1	1	—	—	1	2	1
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	97	69	28	24	19	12	14	13	48	2
Puerperal Pyrexia ...	1	1	—	2	2	1	4	—	—	—
Scarlet Fever... ..	85	44	180	155	44	44	25	20	25	47
Tuberculosis : Pulmonary ...	73	56	67	81	55	46	61	36	56	50
Other Forms ...	21	15	16	7	12	7	2	9	9	3
Whooping Cough ...	202	29	278	55	89	133	38	10	63	20
	1554	768	1808	708	1641	423	943	692	711	176

## Formal Notifications

			Number of Primary Notifications of new cases of Tuberculosis													Total (all ages)
			0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	
Respiratory—Males	...	...	—	—	1	—	2	1	1	5	5	6	6	5	—	32
Respiratory—Females	...	...	—	—	—	—	—	5	4	3	1	1	1	2	1	18
Non-Respiratory—Males	...	...	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Non-Respiratory—Female	...	...	—	—	1	—	—	—	—	1	—	—	—	—	—	2

## Cases Coming to the Notice of the Medical Officer of Health Otherwise than by Formal Notification

[illegible]

Notifications and Deaths in Wards

WARDS	NOTIFICATIONS		DEATHS		
	Pulmonary Tuberculosis	Other forms of Tuberculosis	TOTALS	Pulmonary Tuberculosis	Other forms of Tuberculosis
No. 1—St. George ...	1	—	1	—	—
No. 2—Lindsay ...	1	—	1	—	—
No. 3—St. Catherine	4	—	4	1	—
No. 4—St. Patrick .	9	1	10	—	—
No. 5—St. Thomas	—	—	—	—	—
No. 6—Poolstock ...	3	1	4	—	—
No. 7—Victoria ...	3	—	3	—	—
No. 8—St. Andrew	9	—	9	2	—
No. 9—Swinley ...	4	—	4	1	—
No. 10—All Saints	—	—	—	1	—
No. 11—West Pemberton	6	—	6	1	—
No. 12—North	3	1	4	2	—
No. 13—Central	4	—	4	1	—
No. 14—South	3	—	3	—	—
TOTALS ...	50	3	53	9	—
				9	—



### New Cases and Mortality During 1960

AGE PERIODS :	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0— .....	—	—	—	—	—	—	—	—
1— .....	1	—	—	1	—	—	—	—
5— .....	2	—	—	—	—	—	—	—
15— .....	2	9	—	—	—	—	—	—
25— .....	10	4	1	1	—	2	—	—
45— .....	12	2	—	—	4	1	—	—
65— .....	5	2	—	—	1	—	—	—
75— .....	—	1	—	—	1	—	—	—
TOTALS ....	32	18	1	2	6	3	—	—

The number of deaths from Pulmonary Tuberculosis was 9, compared with 9 in 1959, and 10 in 1958. No death from other tubercular infections occurred during the year, against 1 in 1959, and 1 in 1958.

The rates are as follows :—

Pulmonary Tuberculosis	....	....	0.11 per 1,000 of population
Other Tuberculous Diseases	....	....	0.00 „

### Comparative Statistics, 1956 to 1960

#### Cases Notified

	1956	1957	1958	1959	1960
Pulmonary .....	46	61	36	56	50
Other forms of tuberculosis	7	2	9	9	3
TOTALS ....	53	63	45	65	53

#### Deaths

	1956	1957	1958	1959	1960
Pulmonary .....	10	13	10	9	9
Other forms of tuberculosis	1	—	1	1	—
TOTALS ....	11	13	11	10	9

#### Death Rates

	1956	1957	1958	1959	1960
Pulmonary .....	0.12	0.16	0.12	0.11	0.11
Other forms of tuberculosis	0.01	0.00	0.01	0.01	0.00
TOTALS ....	0.13	0.16	0.13	0.12	0.11

## DISINFECTION

Arrangements have been made to use the old disinfestor at the Welfare Home, Frog Lane, for the disinfection of bedding, etc., which has been associated with cases of certain infectious diseases.

### Distribution of Disinfectants

Disinfestants and disinfectants of known potency are provided free to the occupiers of houses where infestation or infectious disease has occurred, and in cases where there are exceptional circumstances. Other persons who desire supplies are charged a small amount to meet the cost of the disinfectant.

Information on the correct use of these agents is given by the public health inspectors.

*Section V*

---

**National Assistance Act, 1948**

*Part III*

**Welfare Services**



## ADMINISTRATION

The Authority's Welfare Services, under the National Assistance Act, 1948, continue to be controlled by the Health Committee.

The total number of staff employed on Welfare Services at 31st December, 1960, was 95, made up as follows :—

Administrative and Clerical (including persons in charge of Homes)	16
Home Staffs (other than persons in charge) ....	75
Staff employed at Social and Handicraft Centres (including Occupational Therapist) ....	4
	<hr/> 95 <hr/>

## TEMPORARY ACCOMMODATION FOR CASUALS

### SECTION 17.

The Reception Centre was closed on the 16th August this year, when the National Assistance Board opened a new Centre at Walkden, near Manchester to take the place of several old ones in the area.

The Centre had been in use for 103 years, and during this period it is estimated that one and a quarter million casuals had passed through.

## RESIDENTIAL ACCOMMODATION

### SECTION 21A.

A most pleasing feature of the year under review was the opening of "Springfield," on the 20th July. A description of the Home is given below.

### " SPRINGFIELD "

"Springfield" is situated at the junction of Springfield Road and Lynton Avenue on the edge of the Beech Hill Housing estate.

The two storey portion of the building is generally T shaped on plan, each wing radiating from a central entrance hall containing main staircase, office and automatic passenger lift capable of conveying wheel chairs from one floor to another.

The north wing ground floor contains the communal rooms, there being three lounges, together with toilets, staff entrance and staff dining room. A quiet room, staff bed-sitting rooms and matron's suite are on the first floor, together with toilet and bathroom accommodation and a small diet kitchen served by an automatic lift service from the main kitchen.

A special feature of the accommodation is the provision on this floor, adjacent to the staff room, of three double-bedded rooms to be used for the retention of very infirm or confused patients who present psycho-geriatric problems but who do not really require hospital treatment.

The lounges and sick bays have a south westerly aspect, overlooking a paved terrace and rose garden and take advantage of the only available view of the open countryside.

The east and west wings contain the residents' bedrooms, each wing being equipped with bathrooms and toilets on both ground and first floors.

Resident aged persons are accommodated in 31 bedrooms, there being 13 single rooms, 12 double rooms and 6 rooms each for 4 persons. Other rooms contained in the two storey portion of the building include cleaners' stores, sluice rooms, storage space for blankets, utility rooms where residents may do their personal washing, and a sewing room which contains storage space for household linen.

The single storey dining room, which is situated at the end of the north wing, may be entered from the paved terrace in addition to the entrance from within the building. A sliding folding screen provided between the dining room and the adjacent lounge enables the two rooms to be used in conjunction for social occasions.

The main kitchen is separated from the dining room by a servery and washing-up area. Vegetable and food preparation Areas are situated round the centrally placed cooking equipment which is contained within an overhead canopy with electric fan extractors. Various stores, lavatory and locker accommodation for the staff are placed adjacent to the main kitchen.

Domestic hot water and heating for the building are provided from oil-fired boilers, the whole of the building is equipped with fire alarms and a call bell system to the office or staff rooms operates from each bedroom.

The following table shows the numbers of aged persons provided with residential accommodation as at the 31st December, 1960.

(former P.A. Inst.)										
Springfield		Douglas Bank		Norley Hall		Rockwood		St. Stephen's		
AGE :	M.	W.	M.	W.	M.	W.	M.	W.	M.	W.
Over 90	1	1	—	—	—	2	—	—	1	—
85-90	3	2	1	5	—	4	—	1	3	—
80-85	5	8	4	6	7	3	2	2	4	3
75-80	4	4	2	5	5	1	2	3	1	4
70-75	13	8	—	5	5	1	1	1	10	3
65-70	6	1	—	2	3	3	—	—	—	2
60-65	2	1	—	—	1	—	—	—	1	1
Infirm	1	1	—	—	—	2	—	1	—	7
<hr/>										
Average	78		79		78		76		76	
Ages										
<hr/>										

Overall average age 78.



During the year 1960 the number of admissions to Part III accommodation was as follows :—

	M.	W.
(1) From own homes, lodging houses, etc. (including “ short stay ”)	55	56
(2) From hospitals	30	21

The numbers discharged from Part III accommodation was as follows :—

(1) No. dying in Homes	11	9
(2) No. transferred to Hospital	23	22
(3) No. discharged elsewhere	13	20
(4) No. leaving after “ short stay ”	6	13

### Hostel for Men

In addition to the above, 32 men were accommodated in the former Institution. These men require less attention and their need for care arises principally from their lack of supervised accommodation and elementary comforts.

The Committee's policy has always been to vacate the Welfare Home as soon as possible. Unfortunately, the Hostel building programme envisaged in 1948 has been considerably retarded during the past few years due to the need for national and local economy. The result of these restrictions has been that the accommodation at the Welfare Home has had to remain in use for much longer than had been intended. With the opening of Springfield, however, it has been possible to reduce the Part III accommodation beddage from 52 beds to 40 beds, and the Hostel for Men from 60 beds to 45 beds.

### Admission Arrangements

Cases for admission are brought to the notice of the department by personal application, by relatives, by general practitioners, members of the Council, Public Health Inspectors, Health Visitors and so on. There is always a considerable number of persons awaiting admission, and it will be obvious that to admit applicants on a “ first come—first served ” basis would be impracticable. Some cases are of a more urgent nature and the date of application is therefore ignored in assessing priority. All cases are visited frequently and as a vacancy arises it is allocated to an aged person in most urgent need of care.

Where hospital patients are fit for discharge but unable to return home for any reason, they are interviewed by a welfare officer and their names are entered on the waiting list. In this sphere, close liaison is maintained with the Consultant Geriatrician and the Almoners.

### Charges for Accommodation

The Standard Charges for the year were :—

St. Stephen's House £4 2s. 3d., Douglas Bank House, Norley Hall, Rockwood and Springfield £5 19s. 0d. per week.



The following amounts were received on assessments made against residents according to the Scale in use at the present time :—

HOME :						£	s.	d.
St. Stephen's House	....	....	....	....	....	5,497	12	11
Douglas Bank House	....	....	....	....	....	3,781	3	10
Norley Hall	....	....	....	....	....	4,184	18	3
Springfield	....	....	....	....	....	2,585	2	5
Rockwood	....	....	....	....	....	1,782	13	6
Hostel for Men (Accommodation Charges)	....	....	....	....	....	2,307	1	0
Hostel for Men (Meals Charges)	....	....	....	....	....	2,779	8	0

## TEMPORARY ACCOMMODATION

### Section 21b

This sub-section of the Act imposes a duty on local authorities to provide "temporary accommodation for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been foreseen, or in such other circumstances as the authority may in any particular case determine." It would appear that this sub-section was primarily intended to cover those rendered homeless by fire, flood, etc., and that its application to other classes of homeless persons is purely permissive.

In 1954 a part of the ex-Poor Law Institution was adapted and 9 flatlets were provided for homeless families. This scheme envisaged that after a successful period of rehabilitation a family would be transferred to sub-standard accommodation used as "half-way" or intermediate accommodation, and after a further period of rehabilitation, to permanent housing. Three sub-standard properties were then at the Disposal of the Department. By the end of 1960 these had already been dealt with under the demolition programme.

I must once again emphasise that unless some reasonable method is found, consistent with the present housing difficulties in the Borough, by which we can achieve some movement through the Homeless Family Unit, the whole scheme is doomed to failure.

At the 31st December, 1960, 6 families, comprising 1 man, 6 women and 20 children were accommodated.

## DOMICILIARY VISITING

During the year Welfare Officers visited a further 635 aged persons residing alone. A register which is kept in the Department shows that 694 men and 1,412 women reside alone and the following table shows how this number is apportioned in the various wards of the Borough.

## AGED PERSONS LIVING ALONE IN WIGAN :

WARD	Men	Women	WARD	Men	Women
St. George .....	22	61	Swinley .....	79	169
Lindsay .....	57	88	All Saints .....	18	33
St. Catherine .....	65	90	Pemberton West ....	47	53
St. Patrick .....	67	116	Pemberton North ....	84	106
St. Thomas .....	55	183	Pemberton Central	89	180
St. Andrew .....	88	250	Pemberton South	23	83

The information obtained includes particulars of relatives and friends with the frequency of visitation, the family doctor, nature of any disability, an indication of services provided together with a resume of the social conditions and financial circumstances. Due to the extensive visiting carried out, Welfare Services has become more widely known. Advice and guidance has been welcomed and in very few cases has the Welfare Officer been refused entry. A pre-paid post-card was left with each person so that, in the event of their requiring any assistance, advice or welfare services in any way, they had only to post the card and a Welfare Officer would visit to render any assistance that might be required. The elderly appear to be bewildered by the complexity of the social services, and simple matters become, to them, problems of considerable difficulty. It is considered that the solution of these problems by the Welfare Officers made a difference to the mental contentment of the old persons concerned.

Excellent relationships exist between officers of the National Assistance Board and those of the Department. There is an interchange of information regarding old people for whose benefit the services of either Authority are being provided.

**CHIROPODY SERVICE**

This service, run on a voluntary basis by the Rotary 'Inner Wheel' members, is available at Crompton Street Centre to aged persons who are unable, through limited means, to visit a chiropodist in the normal way. The Rotarians are to be congratulated for helping to mobilise a section of the community which could so easily become homebound.

**OTHER SERVICES****Holidays at Rockwood, Colwyn Bay**

Holidays at the Council's Aged Persons' Home at Colwyn Bay were provided for aged persons who were in need of care and attention for a limited period, whose relatives or friends were themselves desirous of taking a holiday but who for the remainder of the year were prepared to care for them in their own homes.

**Section 47. Removal of Persons in Need of Care and Attention**

It was not found necessary to take action under this Section during the year. Cases have arisen where Section 47 procedure might have been applied but has been avoided due to the satisfactory re-adjustment of the old persons' mode of life, habits, etc., made possible through the efforts of the officers of the Health and Welfare Departments.



## **Section 48. Protection of Moveable Property**

A local Authority is obliged under this Section of the Act to safeguard the property of any person admitted to hospital or to residential accommodation where no other suitable arrangements have been or are being made.

No applications were received during the year requesting the Authority to provide protection of moveable property.

## **BURIAL OF THE DEAD**

### **Section 50**

Under this Section of the Act, Local Authorities must accept responsibility for the burial or cremation of the body of any person who has died or been found dead in their area, where it appears that no other person or organisation will do so. The decision of the Ministry of Health a few years ago, that the cost of burial of patients dying in hospital could be a proper charge on health service funds, has somewhat relieved the financial burden.

During the year the service was provided in 1 case.

## **WELFARE ARRANGEMENTS FOR HANDICAPPED PERSONS**

### **Section 29**

#### **Welfare of the Blind**

The functions of the Authority are administered on an agency basis by the Wigan, Leigh and District Society for the Blind. Two Home Teachers are employed and seconded to the Society for duty. The Society provides sheltered employment and training for suitable blind persons, enabling them to engage in work in Workshops for the Blind.

The Home Teaching Service is operated by the Society and is available to all types of people who have become blind. Their needs vary considerably—financial assistance, education, training for employment, pastime occupations, handicrafts and cultural interests. In the course of their duties, the Home Teachers endeavour to establish a friendly contact between themselves and the blind person, so as to inspire confidence and understanding in their association. Regular visiting in their homes is carried out and help given regarding housing, home-help service, etc. The Home Teachers also act as escorts to blind persons attending hospital.

The care of the Deaf Blind persons without speech is one of the most difficult problems confronting the Home Teacher. All Deaf Blind Persons must have regular visits and means of communication (*e.g.*, The Manual Alphabet) must be taught and used.

The Society act as agents for the “ British Wireless for the Blind ” Fund and instal and maintain all sets free of charge.

The Health Committee have purchased 10 Talking Book Machines which have been loaned to blind persons, and are much appreciated.

Extra amenities, such as trips to the seaside, holiday grants, Christmas grants and all kinds of social activities are provided by the Society from the Voluntary Fund and it is only by the generosity of the many donors to the Fund that the Society is able to provide these services to the Blind people of the area.



## CLASSIFICATION OF REGISTERED BLIND PERSONS BY AGE GROUPS

Age Group	31-12-60			NEW CASES REGISTERED Jan. 1st, 1960 to Dec. 31st, 1960 Age at Registration.	
	M.	F.	TOTAL	M.	F.
0 ....	—	—	—	—	—
1 ....	—	—	—	—	—
2 ....	—	—	—	1	—
3 ....	1	—	1	—	—
4 ....	—	—	—	—	—
5-10 ....	2	1	3	—	—
11-15 ....	—	1	1	—	—
16-20 ....	1	—	1	—	—
21-30 ....	2	1	3	—	—
31-39 ....	1	7	8	—	—
40-49 ....	9	3	12	1	1
50-59 ....	4	7	11	—	1
60-64 ....	8	9	17	1	—
65-69 ....	7	10	17	2	—
70-79 ....	16	29	45	3	4
80 and over	19	24	43	5	5
TOTALS	70	92	162	13	11

## AGES AT WHICH BLINDNESS OCCURRED

Age Group.	Total Register			New Cases Registered during 1960		
	M.	F.	TOTAL	M.	F.	TOTAL
0 ....	7	6	13	1	1	2
1 ....	—	—	—	—	—	—
2 ....	1	—	1	—	—	—
3 ....	—	1	1	—	—	—
4 ....	—	2	2	—	—	—
5-10 ....	1	2	3	—	—	—
11-15 ....	2	2	4	—	—	—
16-20 ....	2	1	3	—	—	—
21-30 ....	7	6	13	1	—	1
31-39 ....	3	3	6	—	—	—
40-49 ....	6	3	9	—	—	—
50-59 ....	9	16	25	4	1	5
60-64 ....	7	7	14	1	—	1
65-69 ...	5	12	17	1	2	3
70-79 ....	14	24	38	3	3	6
80 and over	6	7	13	2	4	6
TOTALS	70	92	162	13	11	24

During the year ended 31st December, 1960, 24 names were added to the Register of Blind Persons and 25 names were removed. Details are shown in the following table :—

No. of registered blind persons at 31-12-59	....	163
No. registered 1st Jan. to 31st Dec., 1960	.... 17	
Transfers into Area	.... 6	
Re-certified	.... 1	
	—	24
		187
Deaths	.... 20	
De-certified	.... 1	
Removals out of Area	.... 4	
	—	25
Number on Register, 31-12-60	....	162

The cause of blindness in the above cases was as follows :—

	Males	Females
Bilateral Senile Macular Degeneration	3	—
Cataract	7	9
Myopia	1	—
Glaucoma	—	2
Bilateral Optic Atrophy	—	—
Accident	—	—
Retrolental Fibroplasia	2	—

### Follow - up of Registered Blind Persons

(1) No. of cases registered as blind during the year in respect of which Sec. F. Para. 1 of Forms B.D.8 recommends :—	Cause of Disability	Retrolental Fibroplasia	Others.
	Cataract	Glaucoma	
(a) No treatment	4	1	— 1
(b) Treatment (medical, surgical or optical)	8	1	— 1
(2) No. of cases at (1b) above, which, on follow-up action, have received treatment	2	—	—
(3) No. of cases at (2)			
(a) Vision improved	—	—	—
(b) Sight restored	—	—	—
(c) Treatment continuing at end of year	1	—	—

### Follow - up of Registered Partially Sighted Persons

(1) No. of cases registered as partially-sighted during the year 1960 in respect of which Sec. F. of Form B.D.8. recommends :—	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibro-plasia	Others
(a) No treatment ....	2	—	—	—
(b) Treatment (medical, surgical or optical) ....	3	1	—	3
(2) No. of cases at (1b) above, which, on follow-up action, have received treatment	1	1	—	1
(3) No. of cases at (2) above, in which :—				
(a) Vision improved ....	—	—	—	—
(b) Sight restored ....	—	—	—	—
(c) Treatment continuing at end of year ....	—	1	—	1

### Ophthalmia Neonatorum

(1) Total number of cases notified during the year	....	....	Nil.
--	------	------	------

### Register of Partially Sighted Persons

Age Group	Registered at 31-12-60			Registered during 1960		
	M.	F.	TOTAL	M.	F.	TOTAL
1 ....	—	—	—	—	—	—
2 ....	—	—	—	—	—	—
3 ....	—	—	—	—	—	—
4 ....	—	—	—	—	—	—
5-10 ....	1	—	1	1	—	1
11-15 ....	1	1	2	—	—	—
16-20 ....	—	2	2	—	—	—
21-30 ....	—	—	—	—	—	—
31-39 ....	3	—	3	—	—	—
40-49 ....	2	1	3	1	1	2
50-59 ....	5	3	8	1	—	1
60-64 ....	4	3	7	1	—	1
65-69 ....	2	—	2	1	1	2
70-79 ....	6	6	12	—	3	3
80 and over	5	2	7	—	1	1
	29	18	47	5	6	11

### Welfare of Blind Children

One partially sighted child, who has been ascertained under the Education Act (Handicapped Pupils and School Health Service Regulations, 1945, as being in need of special educational treatment), is being maintained by the Authority as follows :—

	M.	F.
Preston School for the Partially Sighted	.... 1	.... —



## Workshop Employment

The types of employment and extent of provision available for Borough cases is as follows:—

Brush making	....	....	....	....	5 males
Basket making	....	....	....	....	2 males
Machine knitters	....	....	....	....	2 females
Chair seating	....	....	....	....	1 female
Piano tuning	....	....	....	....	1 male
Salesman	....	....	....	....	1 male
Cleaner	....	....	....	....	1 female

On the 31st December, 1960, there were 13 blind persons from the County Borough of Wigan employed in the Workshops.

## Home Workers

There is no Home Workers Scheme in Wigan.

## Placement in Open Industry

The following arrangements have been made for carrying out the placement of blind persons in open industry.

- (1) Each case within the area of the Wigan County Borough be dealt with as it arises.
- (2) That the operation of the placement service be dealt with jointly by the Medical Officer of Health through the Welfare Service Section, the Voluntary Society for the Blind through the Superintendent, and the Local Disablement Resettlement Officer.

## Welfare of the Deaf

The functions of the Authority are, in accordance with Approved Scheme, administered on an agency basis by the Wigan and District Deaf and Dumb Society, acting as agents for the County Borough of Wigan.

## Deaf Register — Grouping

Children under 16 :	Male	Female
Attending Special School	10	1
Attending Other School	—	—
Not at School but Educable	—	—
Ineducable	—	—
Persons aged 16 and upwards :		
Employed	20	14
Undergoing Vocational Training	—	—
Unemployed but available for and capable of training for work	3	—
Incapable of or not available for work	9	14
	<u>42</u>	<u>29</u>

## **Welfare**

Many varied occasions arise where the Welfare Officer for the Deaf has to guide, advise, and interpret for the deaf. Visits to their homes are of prime importance, often bringing to light problems the deaf tend to keep to themselves. Where required, visits are repeatedly made till it is felt the matter has been happily resolved. Assistance in the filling up of forms for Income Tax, Hire Purchase, Assistance Grants and Housing Repairs is often sought and given. Interpretation was provided for the local police in connection with accidents and also for driving test examiners while testing deaf drivers. Two members were escorted to Medical Tribunals, and others to solicitors, clinics, opticians, dentists and doctors where interpretation was also provided. Deaf people also have their share of nature's ills and visits were made to them and interpretation was required in hospitals for doctors and nurses to assist in their examination of deaf patients. A couple who had been a long standing problem were assisted to their benefit. Placement of deaf people in congenial employment is another important matter that absorbs quite a large part of the Welfare Officer's time. Eight deaf persons were found employment and visits are made to their place of employment to resolve any difficulties that may have arisen. There are still some employers (fortunately not a large number) who have a prejudice against deaf workers. Given the opportunity deaf people make excellent employees, which has been proved on many occasions. In the matter of general welfare it will be seen that the Welfare Officer's services are required on a vast variety of occasions and that the deaf are largely isolated from their fellow men and require a sympathetic understanding of their problems.

## **Social and Sports**

The Institute is the focal point of activities and deaf members take part in and enjoy socials, dances, television and other events that are arranged from time to time. Football matches were played with local hearing teams and with teams from Institutes for the deaf in other parts of the country. Bowls competitions were entered with reasonable success. Various indoor games are also played and enjoyed, as were outings to beauty spots, seaside resorts, rambles and places of local interest.

A Committee of duly elected deaf members organises this social life under the Chairmanship of the Welfare Officer and all business is conducted in the language of the deaf; fingerspelling, signs and speech-lipreading.

## **Deaf Children**

Contact has been made with the children and their parents. A gift of Easter Eggs from a local store was distributed and several children have visited the Institute. Steps were taken to expedite the entry of two children into schools for the deaf.

## **Church**

To a great extent the normal Church service is meaningless to deaf people. Regular services are therefore provided in the Institute Chapel. Holy Communion is celebrated monthly by visiting priests. The entire services are designed so that all who attend can follow every part without difficulty. Harvest and Watchnight services were also arranged and other special services were attended, notably the annual service for the deaf in Liverpool Cathedral.



## Welfare of the Hard-of-Hearing

There are 409 known hard-of-hearing persons in the Wigan Borough area.

During the year, help was provided through the local Society for the Deaf in obtaining and repair of Medresco Hearing Aids. Advice and assistance has also been given in individual cases. There is a local Hard of Hearing Fellowship which has a membership of 47.

## Handicapped Persons (General Classes)

### CLASSIFICATION OF GENERALLY HANDICAPPED PERSONS

HANDICAP	Adults		Children		TOTAL
	Male	Female	Male	Female	
Amputation ....	34	3	—	—	37
Arthritis and Rheumatism ....	13	8	—	—	21
Congenital Malformations ....	15	8	3	1	27
Diseases ....	64	11	—	—	75
Injuries ....	61	8	1	—	70
Organic Nervous Diseases ....	47	47	3	3	100
Other Nervous and Mental					
Deformities ....	15	13	—	—	28
T.B. (Respiratory) ....	5	2	—	—	7
T.B. (Non-Respiratory) ....	2	—	—	—	2
Other disorders (not specified					
above) ....	9	6	—	—	15
	<u>265</u>	<u>106</u>	<u>7</u>	<u>4</u>	<u>382</u>

## Handicapped Persons (Accommodation)

9 Handicapped Persons are in accommodation provided by other authorities, as follows :—

	Males	Females
Maghull Homes for Epileptics ....	—	3
Langho Epileptic Colony, Blackburn ....	1	1
Cripples' Help Society, Tan-y-Bryn, Abergele ....	—	1
St. Elizabeth's Home for Epileptics, Much Hadam ....	—	2
"Beachways," Southport ....	1	—
	<u>2</u>	<u>7</u>

## Adaptations

The Scheme authorises the Council to incur expenditure on alterations to the homes of handicapped persons so as to assist them to overcome the effects of their disability. Most of the applications arise as a result of the proposed issue of wheelchairs or invalid tricycles by the Ministry of Health, when there is a need for assistance towards the cost of making a pavement crossing or providing an access path to the storage shed. 2 handicapped people were helped in this way during the year.



## **Handicrafts**

Handicraft classes are held at the Social Centres in Crompton Street and Tunstall Lane, and visits are made to homebound handicapped persons.

During the year 271 classes were held and 233 visits made to the homebound.

Handicapped persons are taking advantage of the facilities offered at the Centres and have been encouraged to attend the handicraft classes provided. The types of work undertaken by the men are rug making, basketry, lampshades, tapestry, leatherwork; the main occupations of the women being crochet work, embroidery, hand and machine knitting, woodwork, lampshades, dressmaking, millinery and raffia work.

There appears to be a very happy atmosphere in the Classes and many new friendships have been made.

## **Other Services**

Holidays have been arranged for several blind and other severely disabled persons at the Aged Persons' Home at Colwyn Bay.

## **VOLUNTARY ORGANISATIONS**

Considerable help has been given by the Rotary Club, W.V.S., Old People's Welfare Committees, Welfare Services Comforts Fund Committee, Churches, Youth Organisations and Dramatic Societies in connection with the welfare of aged and handicapped persons. During the year, the following amenities were provided :—

- Outings for handicapped people.
- Transport of handicapped persons to and from employment.
- Food parcels and coal to needy and elderly persons.
- Books, magazines, etc., to Homes and Centres.
- Clothing for necessitous cases.
- Toys for children.
- Organising of garden parties and Christmas fairs.
- Visiting elderly persons.
- Complimentary tickets.

## **CIVIL DEFENCE**

### **Rest Centres**

The Medical Officer of Health is responsible for the planning of the Rest Centre Service, and during the year there has been maintained a list of 34 premises which have been earmarked for this purpose.

### **Billeting**

Further progress has been made during the year in compiling a register of accommodation in the Borough which could be made available for the billeting of the homeless in the event of war.

### **Training**

At the 31st December, 1960, 244 members of the Civil Defence Corps had been allotted to the Welfare Section.

*Section VI*

---

**Sanitary Circumstances  
of the Area**

## WATER SUPPLY

The Borough Engineer, Mr. G. Keighley, has kindly supplied the following information on the Borough Water Supply :—

The Borough is supplied with water for domestic and trade purposes from impounding reservoirs at Worthington, from wells at Nicholson's Pit, Winstanley and Bispham Shaft, Billinge, and from bulk supplies obtained from Manchester Corporation by means of pipe lines connected to the Thirlmere aqueduct at Adlington.

The Corporation also owns Reservoirs at Adlington and Pemberton, which are used for compensation purposes only. A further source has been developed at Newfoundland Shaft, Adlington, to assist the Corporation in meeting their compensation water obligations.

The catchment areas feeding the impounding reservoirs are mainly devoted to agricultural use and both areas contain farms and isolated dwellings. The Worthington catchment has suffered due to sporadic development along the main roads traversing the area. Constant supervision is necessary to minimise the danger of pollution and local improvements are made from time to time at points of suspected pollution.

The scheme for the augmentation of water supplies including the service reservoirs at Prospect, Standish, is now complete. The new pipe lines totalling some 10 miles in length, from the Thirlmere aqueduct at Adlington permit not only for increased domestic supplies but also for large industrial supplies, particularly to the new factory completed for Messrs. H. J. Heinz Co. Ltd., at Kitt Green.

The new Pumping Station at the Worthington Waterworks is now in use for pumping the water from the Worthington Impounding Reservoirs to the Boars Head service reservoir. The pumps will also pump water from this source to the new service reservoirs at Prospect, Standish.

Slow sand and mechanical filters are provided both at Worthington and at Edgewood. Chlorination plants are installed at Worthington, Edgewood and Bispham; thus all water supplies are chlorinated before distribution.

Tap samples are taken every month from four dwellings selected at random in the Borough, and are despatched for chemical and bacteriological examination. Samples of raw and filtered waters are also obtained and tested.

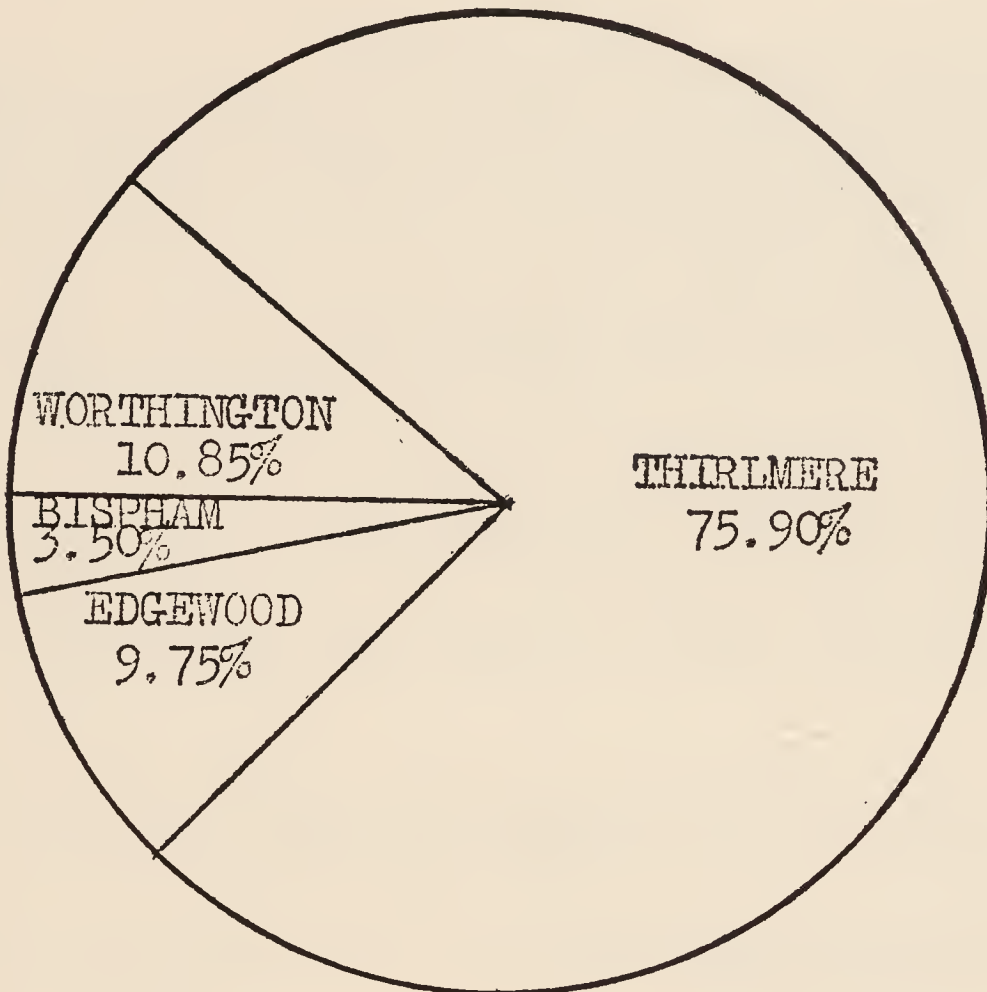
The approximate average daily consumption for domestic purposes reached 2,101,666 gallons, representing approximately 25.96 gallons per head per day for a population of 80,950.

Bulk supplies of water are made to the Orrell U.D.C. and the Billinge and Winstanley U.D.C., under agreements between the Corporation and the respective Councils. Some dwellings situated on the Borough boundaries are supplied with water by the Orrell U.D.C. and the Billinge and Winstanley U.D.C.



The following diagram showing the percentages of water supplied from the various sources is extracted from the report of the Waterworks by the Borough and Water Engineer.

### Water Supplied from Various Sources, 1960 - 1961



### RIVERS AND STREAMS

The River Douglas and the streams running into it are the natural means of draining the Borough.

The River is badly polluted before entering the Borough and a certain amount of pollution occurs within.

The Lancashire River Board are actively concerned with this problem and are at present carrying out a number of investigations and negotiations throughout the Douglas Valley.

The Board are frequently engaged on the cleaning of the river bed and the maintenance of its banks.

### SEWERAGE AND SEWAGE DISPOSAL

Practically the whole of the Borough is sewered and drained. The sewage is conducted from the town by two main outfall sewers (27 ins. and 36 ins. in diameter) to the Sewage Disposal Works at Hoscar—which are seven miles distant. Before leaving the Town the sewage is passed through detritus tanks and fine screens, where grit and gross solid matters are removed mechanically. At this point storm water flows in excess of 3 dry weather flow and up to a maximum of 6 dry weather flow are treated in the storm water tanks. During storms of high intensity, flows in excess of 6 dry weather flow pass direct into the River Douglas.

The main treatment works at Hoscar was officially opened on the 15th October, 1958, following extensive reconstruction work. This work provides full treatment for five million gallons per day, dry weather flow, of sewage and trade effluent. One million gallons of this is trade effluent from a new food factory.

The sewage flow enters the Hoscar Works via the new outfall Pumping Station, designed to increase the carrying capacity of the outfall sewers. Preliminary settlement is carried out in four radial flow tanks equipped with electrically operated desludging gear. The settled sewage gravitates to four batteries of biological filters designed to operate as either single, alternate double, or re-circulation filters. Two automatic pumping stations controlled by flow recorders provide accurate proportioning of the re-circulated effluents. Before passing forward to the River Douglas the filtered effluents receive adequate settlement for removal of filter solids. The combined sludges from the sedimentary processes are treated in single stage heated digestion tanks prior to de-watering on sludge drying beds. Three dual fuel engine generating sets, designed to operate on diesel oil, or on methane gas evolved during digestion of the sludge, have been installed. These provide the whole of the power requirements in respect of pumping, lighting and heating on the new works.

During the year 1960-61 (April, 1960 to March, 1961) the following amounts of sewage have been treated at the Hoscar Moss and Pemberton Sewage Works :—

Pemberton Storm Water Works	....	....	309,465,000	gallons
Hoscar Bacteria Beds	....	....	2,359,790,000	,,
				<hr/>
TOTAL SEWAGE TREATED	....	....	2,669,255,000	,,
Total solids removed, detritus tanks and screen chambers,				
Pemberton	....	....	2,967	tons
Total solids removed, Hoscar Works	....	....	50,920	,,
Total dried sludge recovered, Hoscar Works	....	....	1,261	,,
Weight of dried sludge per million gallons of sewage	....	....	0.531	,,
Rainfall for year	....	....	40.04	inches
				(Hoscar).

## PUBLIC BATHS

The Baths Superintendent, Mr. J. H. Cockrell, has kindly supplied the following statistics and report :—

The Wigan Corporation Baths comprises two Indoor Swimming Pools, one Ladies, one Gents., 16 Slipper Baths, one Cabinet Vapour Bath and one Establishment Laundry.

The Ladies Plunge Bath is 18 yards long by 9 yards wide and has a capacity of 40,000 gallons. The Gentlemen's Plunge Bath is 25 yards long by 10 yards wide and has a capacity of 60,000 gallons.

The Filtration Plant consists of two by 10 ft. Royles Type Vertical Pressure Filters complete with Chemical Dosage Plant and the filtered water is sterilized by means of chlorinated water.

The contents of the Ladies Plunge Baths are circulated through the Filtration Plant once every  $2\frac{1}{2}$  hours and the water in the Gentlemen's Plunge Bath once every four hours.

Tests for alkalinity and chlorine content are taken frequently each day and every attempt is made to ensure that the water conforms with the standards laid down by the Ministry of Health. Samples of water are taken, periodically, from the Swimming Baths for bacteriological examination and chemical tests.

During the year eight samples each from the male and female plunge baths were taken and all were satisfactory.

#### Bathers :

Male Plunge Baths	....	....	....	....	....	....	122,302
Male Private Baths	....	....	....	....	....	....	13,536
Female Plunge Baths	....	....	....	....	....	....	61,150
Female Private Baths	....	....	....	....	....	....	6,768
Mixed Bathing: Adults and Juniors	....	....	....	....	....	....	9,373
Contracts, Free Passes, Season Tickets, etc.	....	....	....	....	....	....	3,006
							216,135
							216,135

Number of Bathers during the past five years :—  
Year ended 31st March :

1957	....	....	....	....	....	....	....	165,260
1958	....	....	....	....	....	....	....	171,804
1959	....	....	....	....	....	....	....	216,607
1960	....	....	....	....	....	....	....	200,519
1961	....	....	....	....	....	....	....	216,135

The figures show an increase on the previous year due to the fact that the Baths were closed from December 31st, 1959 until March 28th, 1960.

It is very disappointing to record that the Ministry of Housing and Local Government have not yet given permission to proceed with the erection of the New Baths, but it is hoped that in the very near future the Ministry will give favourable consideration to the project and fulfil a long felt need in the town.

It will be appreciated that until New Baths have been built the congestion at the existing Baths will be in great evidence for some time to come.



## PUBLIC CLEANSING

Mr. W. Smith, the Director of Public Cleansing, has supplied the following particulars :—

**REFUSE COLLECTION AND DISPOSAL.**—The collection of dry house refuse and trade refuse is carried out entirely by mechanical transport. 76 per cent. of the refuse collected is disposed of by tipping.

**NIGHTSOIL AND PAIL REFUSE.**—The refuse (450 tons) is disposed of direct to farmers as manure. All pails are washed and disinfected after each collection.

**Trade Refuse.**—Fixed charges were introduced on November 1st, 1950, for the removal of this refuse. The shops and business premises in the town centre have a daily collection.

1,600 tons of trade refuse was delivered at the tipping site by private traders and contractors.

A scale of charges, in accordance with vehicle capacity, is operated.

**Gully Cleansing.**—During the year, 16,766 gullies were emptied.

**Public Convenience.**—The following conveniences and urinals are maintained and cleansed by the Department :—

1 public convenience for ladies and gents., with attendants.

7 public conveniences for ladies and gents., without attendants.

14 public urinals.

All urinals are cleansed and inspected twice per day, once on Sundays.

**General.**—The quantity of refuse dealt with by the Refuse Disposal Plant during the year 1960 was 6,965 tons, and the quantity tipped was 22,042 tons. In April, 1950, the Corporation introduced a Dust Bin Renewal Scheme, as a direct rate charge.

During the year, 951 bins were renewed and 380 sold to private properties not included in the scheme.

123,500,000 square yards of street have been swept during the year.

## CREMATION

The Medical Officer of Health and two Assistant Medical Officers on the Health Department staff act as medical referees to the Corporation Crematorium. During the year under review 567 certificates for cremation were issued.

## PUBLIC HEALTH INSPECTION

Mr. John B. Marsh, Chief Public Health Inspector, reports :—

The year under review has been a busy one and much has been achieved in spite of the shortage of staff.

The Slaughterhouse Report, which was called for by November, was submitted to the Minister. This report detailed how far the existing nine private slaughterhouses fall below the standard set by the new Hygiene Construction Regulations and the probable future slaughtering requirements for both the Borough and adjoining authorities. It is little realised that the present number of animals slaughtered and inspected in the Borough is estimated to be equivalent to approximately twice the needs of the population. The burden of inspecting the fresh meat supply for a large population other than that of the Borough falls on this authority. However, 100% meat inspection is always maintained.

Slum Clearance was greatly accelerated during the year because of the increased proportion of new accommodation available for re-housing families from unfit dwellings. The extra work involved is amply rewarded by the sight of demolition of the old insanitary properties. The work of improving existing properties continues both by departmental action and by owners, mainly owner-occupiers availing themselves of the grant for providing Standard Amenities. These include (i) a bath or shower in a bathroom, (ii) wash hand basin, (iii) hot water supply, (iv) internal or contiguous water-closet, (v) adequate food storage. The time should not be too far distant when the standard of fitness of a dwelling as laid down in the Housing Act should be revised to incorporate all the aforementioned amenities.

Atmospheric Pollution is ever to the fore and towards the end of the year work on the detailed survey of the cost of adapting the appliances in each house in the proposed smoke control area was commenced. This task involves painstaking work but it is hoped that the Order will be made early in the ensuing year. Many observations have been carried out on fuel installations and resulting consultations with industrial users have resulted in improvements and further plans of modernisation.

Many visits have been made to food premises involving constructional changes and ensuring that compliance with the Food Hygiene Regulations is maintained. The main problem remaining in this field of public health is the education of the food handler and much is yet to be achieved.

The sampling of foodstuffs for chemical and bacteriological examination has been carried out and in addition samples of water, swimming bath water, rag flock and other filling materials, animal feeding stuffs and fertilizer have also been taken.

On the whole, progress during the year has been satisfactory but it is hoped that a full complement of public health inspectors in the coming year will enable greater progress to be made in fields of atmospheric pollution and food hygiene, whilst maintaining at least the present rate of slum clearance.

## Summary of Work Undertaken During the Year

Houses and premises inspected and visited <i>re</i> nuisances and complaints	2120
Re-visits to nuisances	3335
Other visits made	1167
Visits to premises (testing of drainage)	612
Nuisances discovered	1821
Nuisances abated	1082
Notices issued (preliminary)	635
Notices issued (formal)	258
Letters issued <i>re</i> Nuisances	395
Visits to premises <i>re</i> Housing Act	609
Re-visits to premises <i>re</i> Housing Acts	819
Visits <i>re</i> Certificates of Disrepair	59
„ Infectious diseases and food poisoning	7
Visits to slaughterhouses	2997
Visits <i>re</i> offensive trades	3
Visits to markets	9
„ butchers' shops	41
„ food preparers	83
„ caterers	15
„ other food shops	216
„ dairies	46
„ milkshops	24
„ ice-cream manufacturers	19
„ ice-cream shops	46
„ bakehouses	22
„ houses let-in-lodgings	3
„ common lodging houses	4
„ factories—power	32
„ factories—non—power	2
„ cinemas	9
„ places of entertainment	17
„ caravans	33
„ <i>re</i> rats and mice—dwellings	2800
„ „ other premises	12745
„ smoke abatement	362
No. of shops observations	27
Visits to shops under Shops Act	24
Visits <i>re</i> Poisons Act	1
Visits to premises <i>re</i> applications for tenancy of Council houses	18
„ verminous premises	61
Reports to Borough Engineer <i>re</i> dangerous structures	21
Watercourse Inspections	4
Visits to Licensed Premises	10
„ <i>re</i> Standard Grants	419
„ conversions	1
„ Diseases of Animals (Waste Food) Order	8





## Pharmacy and Poisons Act, 1933

No. of " Listed Sellers " on register	....	....	....	....	87
---------------------------------------	------	------	------	------	----

## Places of Entertainment

These premises are invariably kept in a satisfactory condition. In addition to routine visits all the places of entertainment are inspected and reported on annually prior to the granting of the licence.

## Rodent Control

## Prevention of Damage by Pests Act, 1949

In addition to the enormous amount of damage done by rodents to food-stuffs and the fabric of buildings, they are also potential carriers of food poisoning organisms. The majority of outbreaks are due to rats emerging from the sewerage system, and to control this rodent population each of the 2,000 manholes is baited twice annually. This, more than any other action, controls the ever-present menace.

Every reported outbreak of rats and mice is investigated and action taken. Those outbreaks occurring on domestic premises are treated free of charge whilst a nominal charge is made for the treatment on industrial or business premises.

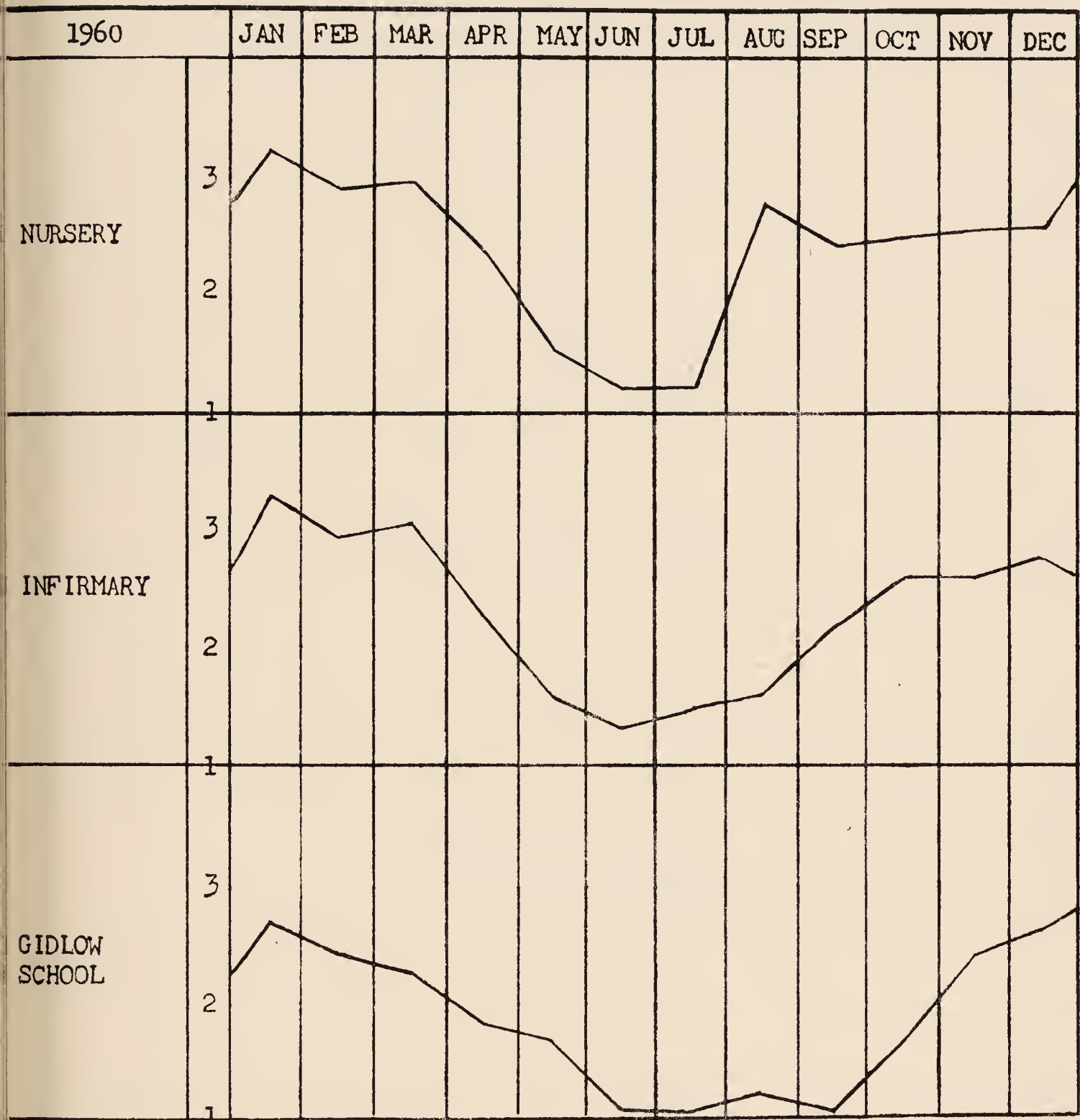
Visits paid by rodent operators :—

[illegible]

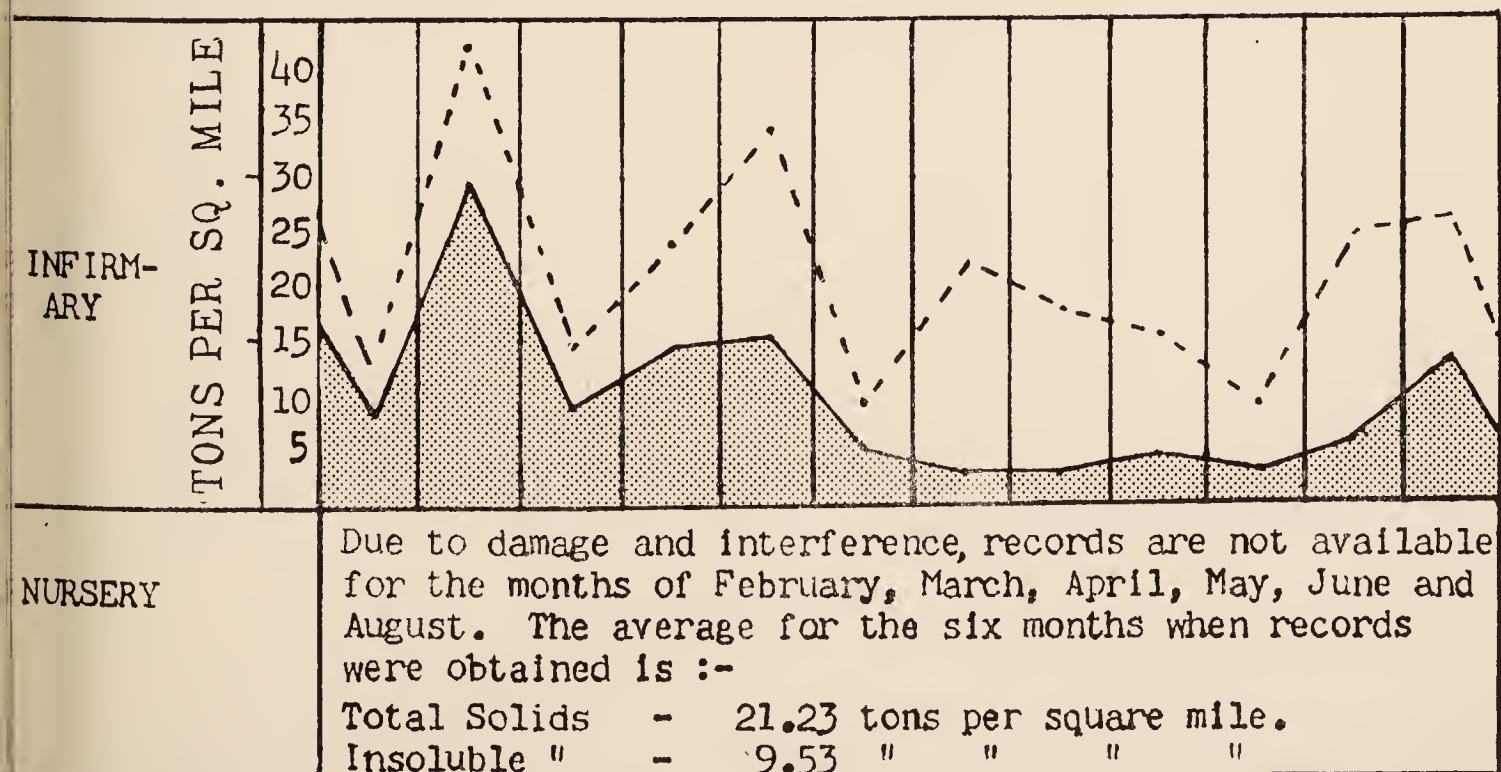
# ATMOSPHERIC POLLUTION RECORDS

## ESTIMATION OF SULPHUR BY LEAD PEROXIDE METHOD

Weight of  $\text{SO}_3$  collected per 100 square centimetres per day (in milligrammes)



DEPOSIT GAUGE. Total solids - - - - Insoluble solids ———







## *Section VII*



# Housing

## HOUSING ACCOMMODATION

It is gratifying to note that the re-housing of people from houses unfit for human habitation reached a peak. During the year 1,288 persons comprising 374 families were re-housed into Corporation dwellings. It is hoped that sufficient accommodation will be made available to at least maintain this rate of slum clearance.

Many houses have been brought up to a standard of fitness by both formal and informal procedure under the Public Health and Housing Acts.

Under the House Purchase and Housing Acts, 1959, some 206 applications were received for grants towards providing the five standard amenities.

Housing accommodation as at 31st December, 1960 :—

No. of dwelling houses	....	....	....	....	....	23,993
„ business premises with living accommodation	....	....	....	....	....	932
„ licensed premises with living accommodation	....	....	....	....	....	141
						<hr/> 25,066 <hr/>

No. of dwelling houses erected in 1960 :—

By Local Authority	....	....	....	....	....	343
By Private Enterprise	....	....	....	....	....	102

### Common Lodging Houses

No. of common lodging houses in the Borough	....	....	....	....	....	2
„ lodgers allowed nightly	....	....	....	....	....	63
„ visits	....	....	....	....	....	4

### Houses Let-in Lodgings

No. of visits	....	....	....	....	....	....	3
---------------	------	------	------	------	------	------	---



## LEGAL PROCEEDINGS TAKEN DURING THE YEAR

No action was necessary for non-compliance with abatement notices.

### RENT ACT, 1957

This Act came into force on the 5th July, 1957, and revised the procedure in connection with the issue of Certificates of Disrepair.

During the year 23 applications were received for Certificates of Disrepair. In 16 cases the landlords gave undertakings to carry out the necessary work within six months but two of these undertakings were refused by the local authority. 6 Certificates were issued.

30 applications for the revocation of certificates were received. 8 of the tenants objected to the cancellation of certificates but in three cases the local authority decided to cancel in spite of the tenants' objections. 18 certificates were cancelled.

7 applications were received for certificates as to the remedying of defects—1 from a landlord and 6 from tenants. All were granted.

There has again been a considerable reduction in both applicants for certificates of disrepair and applications for cancellation of certificates.



*Section VIII*

---

**Inspection and  
Supervision of Food**



## EXAMINATION OF WATER

### Chemical Analysis

During the year 40 routine samples of water were sent to the Public Analyst for examination.

The results of these examinations, expressed in averages, are given below :—

	Bispham and Nicholson's Pit	Edgewood and Nicholson's Pit	Worthington & Thirlmere
	Parts per 100,000	Parts per 100,000	Parts per 100,000
Temporary Hardness .....	11.94	12.8	2.4
Permanent Hardness .....	11.76	12.4	2.4
Total Hardness .....	23.7	25.2	4.8
Alkalinity .....	11.94	12.8	2.4
Combined Chlorine .....	3.0	2.8	1.10
Ammoniacal Nitrogen .....	Negl.	Negl.	Negl.
Albuminoid Nitrogen .....	0.0001	0.003	0.0022
Nitrogen as Nitrites .....	Negl.	Negl.	Negl.
Nitrogen as Nitrates .....	0.21	0.21	0.056
Oxygen absorbed in 4 hrs. at 27° C. ....	0.04	0.06	0.06
PH Value .....	6.93	6.75	7.00

### Bacteriological Examination

During the year 52 routine samples of water were sent to the Public Health Laboratory, Manchester, for examination. 51 special samples were taken to test installations. All were satisfactory.

## MILK SUPPLY

The Borough and surrounding urban and rural areas now comprise a Specified Area. This in effect makes it an offence for any person to sell milk other than Tuberculin Tested Milk, Tuberculin Tested Pasteurised, Pasteurised Milk and Sterilised Milk. Therefore the milk which is received by the public has either been effectively heat treated or has been derived from a herd which is regularly examined and subjected to the tuberculin test.

There are three licensed pasteurising plants in the Borough and samples at all stages of treatment and distribution are taken for both chemical composition and bacteriological purposes. All the samples were satisfactory.

No. of visits to dairies	....	....	....	....	....	....	46
,, milkshops	....	....	....	....	....	....	24
No. of dealers licensed for the sale of sterilised milk	....	....	....	....	....	....	303
,, licensed for the sale of pasteurised milk	....	....	....	....	....	....	128
,, licensed for the sale of tuberculin tested milk	....	....	....	....	....	....	58
No. of dealer (pasteuriser's) licences	....	....	....	....	....	....	3
persons registered as distributors of milk	....	....	....	....	....	....	310
,, premises registered as dairies	....	....	....	....	....	....	3

## Bacteriological Examination of Milk

144 samples of milk were submitted for bacteriological examination :—

PASTEURISED : 94 93 samples passed the Phosphatase Test and all the Methylene Blue Test. 1 sample was declared void for the Phosphatase Test.

TUBERCULIN TESTED : 21 19 samples passed the Phosphatase and Methylene Blue Tests. 1 sample was declared void for the Methylene Blue Test.

STERILISED : 29 In all cases the Turbidity Test was negative.

82 samples of milk were obtained for analysis and submitted to the Public Analyst. 7 of these were the subject of adverse reports. In the case of the 7 samples the milk, although below the presumed standards, were genuine but sub-standard and therefore no deliberate adulteration had taken place.

## ICE CREAM

### Ice Cream (Heat Treatment) Regulations, 1959

These regulations came into force on the 27th April, 1959. The major amendments to the superseded regulations are :—

1.—Water ices and ice lollies that are mixed before freezing are exempt from the requirements as to pasteurisation or sterilisation if their pH value is 4.5 or less, *i.e.*, if they are sufficiently acid to make heat treatment unnecessary.

2.—As a method of heat treatment sterilisation is now permitted.

### The Labelling of Food Amendment Regulations, 1959

These regulations prohibit the labelling, marking or advertising ice cream in a manner suggestive of dairy produce unless the ice cream contains no fat other than milk fat. It is also an offence to sell under the description "ice cream" any pre-packed ice-cream which contains fat other than milk fat unless it bears on the wrapper or container a declaration "Contains non milk fat" or "Contains vegetable fat."

There are now four registered manufacturers of ice cream within the Borough. Regular inspections of the premises take place and time/temperature checks are made of the equipment to ensure that complete pasteurisation and cooling of the product is maintained.

- (a) To ensure that the composition of the product as laid down in the Food Standards Regulations is maintained.
- (b) That the labelling of the product is such that it is readily distinguishable to the public, whether the ice cream has been made from dairy or vegetable fat.
- (c) To ensure that the ice cream has been manufactured under hygienic processes.

For the latter purpose 72 samples were taken and subjected to the methylene blue reduction test. This is a colour reduction test and the results are expressed as Grades 1-4. A comparison of the last two years' results shows the improvement taking place.

	1959	1960	
Grades 1	54	66	} satisfactory
„ 2	11	4	
„ 3	6	1	} unsatisfactory
„ 4	1	1	

8 samples of ice-cream were also taken under the Food and Drugs Act and submitted to the Public Analyst. These were reported as satisfactory.

### Retailers

The number of premises registered under Section 34 of the Wigan Corporation Act, 1933 for the sale of ice-cream on 31st December, 1960 was 324.



**FOOD PREMISES**

Number of food premises in the Borough :—

'Purveyor of Meat' premises	....	....	....	....	....	92
Restaurants, cafes and snack bars	....	....	....	....	....	39
Fried Fish shops	....	....	....	....	....	77
Grocery shops....	....	....	....	....	....	382
Greengrocery shops	....	....	....	....	....	57

Number of food premises registered :—

Section 16, Food and Drugs Act, 1955—

Butchers	....	....	....	....	....	7
Wholesale grocers	....	....	....	....	....	1
Pie maker	....	....	....	....	....	1
Confectioner	....	....	....	....	....	1

Section 34, Wigan Corporation Act, 1933—

Ice-cream premises	....	....	....	....	....	324
--------------------	------	------	------	------	------	-----

Milk and Dairies Regulations, 1949-54 :—

Dairies	....	....	....	....	....	3
---------	------	------	------	------	------	---

**Inspection of Food Premises**

The following is a summary of the defects discovered at food premises upon inspection :—

Defective ceilings	....	....	....	....	....	3
Defective walls	....	....	....	....	....	3
Defective floor and/or covering	....	....	....	....	....	4
Lack of cleanliness of ceilings	....	....	....	....	....	5
Lack of cleanliness of walls	....	....	....	....	....	5
Lack of cleanliness of floors	....	....	....	....	....	1
Lack of proper ventilation	....	....	....	....	....	1
Lack of cleanliness of working surfaces	....	....	....	....	....	3
Lack of cleanliness of equipment	....	....	....	....	....	1
Insufficient accommodation of refuse disposal	....	....	....	....	....	2
Insufficient washing facilities	....	....	....	....	....	7
Insufficient protection in cellar from vermin	....	....	....	....	....	1
Noise from cellar pump	....	....	....	....	....	1
Smell from bar sink draining to well	....	....	....	....	....	1
Insufficient cover for food	....	....	....	....	....	1
Wash your hands notice not displayed	....	....	....	....	....	1
Lack of name and address on stall	....	....	....	....	....	1

Sanitary Accommodation :—

Lack of cleanliness	....	....	....	....	....	1
Insufficient flushing apparatus	....	....	....	....	....	1

## **Education**

Education of shopkeepers in connection with 'clean food' has been carried out by means of individual talks on the premises and by the distribution of suitable pamphlets.

## **Food Hygiene**

The task of bringing all food premises up to the prescribed structural requirements has almost been completed but by far the greatest problem is the education of the food handler. It is a long painstaking task undertaken by the public health inspectors whilst the food handler is at his task. A great deal of patience, tact and time is required, and only when this problem is overcome can the Food Hygiene Regulations be said to be effective. To support these visits striking posters from the Central Council for Health Education are liberally distributed, and there is no doubt that these posters do have a considerable impact.

## **MARKET HALL**

The Market Hall contains in one unit the main market, the fish market, the wholesale and retail fruit markets. Frequent visits are made and the conditions are satisfactory.

## MEAT INSPECTION

The Slaughterhouses Report was submitted to the Minister. From the outset it appeared that in varying degrees none of the existing nine slaughterhouses complied with the new Construction Regulations. The date suggested to the Minister for the coming into force of the Regulations was 1st January, 1964. Although it appeared regrettable that the date for bringing houses up to modern hygienic standards should be so far in the future it was necessary on account of the proposed comprehensive de-revelopment of an area in which four slaughterhouses are located. The slaughtering facilities, however, are likely to be increased for not only have the four affected owners declared their intention of building new slaughterhouses but a new licence was applied for by a large distributing meat firm with an estimated kill of 100 cattle units per day. If this proposed new slaughterhouse were to be built it would have the effect of doubling the present number of slaughtering units.

100% Meat Inspection has been maintained as always, and it is very gratifying to note the large decrease in the incidence of tuberculosis. In the previous year the percentage of cows and other bovines involved was 3.2 and 25.5, respectively. For the current year the incidence is 1.4% and 6.0%. This once dangerous and wasteful disease is now rapidly becoming a rarity.

No. of visits to slaughterhouses	....	....	....	....	....	2997
,, markets	....	....	....	....	....	9
,, butchers' shops	....	....	....	....	....	41
No. of certificates issued (condemned food)	....	....	....	....	....	687



### Carcases Examined During the Year 1960

	Cattle exc. Cows	Cows	Calves	Pigs	Sheep	TOTAL
Carcases examined ....	3256	10537	179	13172	22540	49684
Carcases totally condemned ....	4	15	7	5	15	46
Percentage totally condemned ....	0.12	0.14	3.91	0.04	0.07	0.09

### Carcases and Offal Inspected and Condemned in Whole or in Part

	Cattle excluding Cows	Cows	Calves	Pigs	Sheep	Horses
Number killed ... ..	3256	10537	179	13172	22540	—
Number inspected ... ..	3256	10537	179	13172	22540	—
<b>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI :</b>						
Whole carcasses condemned ...	2	11	7	5	15	—
Carcases of which some part or organ was condemned ... ..	393	5813	3	1283	596	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	12.1	55.3	5.6	9.8	2.7	—
<b>TUBERCULOSIS ONLY :</b>						
Whole carcasses condemned ...	2	4	—	—	—	—
Carcases of which some part or organ was condemned ... ..	44	629	—	293	—	—
Percentage of the number inspected affected with tuberculosis ...	1.4	6.0	—	2.2	—	—
<b>CYSTICERCOSIS :</b>						
Carcases of which some part or organ was condemned ... ..	14	53	—	—	—	—
Carcases submitted to treatment by refrigeration ... ..	3	1	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

The following meat and offal from the slaughterhouses was surrendered and destroyed, or sold for manufacturing purposes, during the year 1960.

	Whole carcase and all Offal Con- demned	Part of Carcase Con- demned	OFFAL CONDEMNED									
			Heads	Lungs	Livers	Hearts	Stomachs	Spleens	Skirts	Kidneys	Udders	Mesen- teries
Affected with Tuberculosis :												
Cattle (exc. Cows) ...	2	1	13	37	11	—	2	2	2	2	—	2
Cows ... ..	4	7	220	592	65	—	6	3	22	9	—	21
Calves ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Pigs ... ..	—	2	275	29	33	5	—	—	1	2	—	7
Sheep ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Affected with Cysticercosis :												
Cattle (exc. Cows) ...	—	—	8	—	—	6	—	—	—	—	—	—
Cows ... ..	—	—	31	1	—	21	—	—	2	—	—	—
Calves ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Pigs ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Sheep ... ..	—	—	—	—	—	—	—	—	—	—	—	—
Affected with other Diseases :												
Cattle (exc. Cows) ...	2	—	6	78	364	1	2	5	2	10	—	—
Cows ... ..	11	4	37	1051	5743	23	12	275	30	245	103	11
Calves ... ..	7	—	—	2	1	—	—	—	—	—	—	—
Pigs ... ..	5	—	2	1090	369	343	1	58	—	72	1	2
Sheep ... ..	15	—	—	30	592	3	—	—	—	2	—	—
	46	14	592	2910	7178	402	23	343	59	342	104	43

Summary of other Food Condemned, 1960

Meat	....	....	....	....	....	....	....	337 lbs.
Canned Meat	....	....	....	....	....	....	....	1002
Fish	....	....	....	....	....	....	....	350 lbs.
Canned Fish	....	....	....	....	....	....	....	207
Fruit	....	....	....	....	....	....	....	3277 lbs.
Canned Fruit	....	....	....	....	....	....	....	1990
Vegetables	....	....	....	....	....	....	....	7446 lbs.
Canned Vegetables	....	....	....	....	....	....	....	711
Canned Milk	....	....	....	....	....	....	....	144
Canned Jam	....	....	....	....	....	....	....	6
Canned Soup	....	....	....	....	....	....	....	47
Packages of Other Food	....	....	....	....	....	....	....	80
Other canned or bottled foods	....	....	....	....	....	....	....	263
Sausages	....	....	....	....	....	....	....	69 lbs.
Fowl	....	....	....	....	....	....	....	1
Butter	....	....	....	....	....	....	....	293 lbs.
Margarine	....	....	....	....	....	....	....	54 lbs.
Dried Fruit	....	....	....	....	....	....	....	30 lbs.
Barley	....	....	....	....	....	....	....	28 lbs.
Cakes	....	....	....	....	....	....	....	210 lbs.

All food condemned, other than meat, is destroyed at the Frog Lane Depot of the Corporation Cleansing Department.

## FOOD AND DRUGS ACT, 1955 — SAMPLING

During the year 254 samples of milk and various other foods obtained under the above Act were submitted to the Public Analyst for examination.

### SAMPLES TAKEN DURING 1960 :—

ARTICLES	Total Number analysed	Samples regarded as adulterated below standard or otherwise not complying with the prescribed requirements		ARTICLES	Total Number analysed	Samples regarded as adulterated below standard or otherwise not complying with the prescribed requirements	
		Number	%			Number	%
Ale (Brown) .....	1	—	—	Lentils.....	2	—	—
Arrowroot .. .....	2	—	—	Liquid Paraffin	1	—	—
Baking Powder ..	1	—	—	Macaroni .....	2	—	—
Barley .....	2	—	—	Margarine .....	2	—	—
Beef Extract .....	1	—	—	Meat Paste .....	5	—	—
Biscuits .....	2	—	—	Meat Pies .....	4	—	—
Bismag. tabs .....	1	—	—	Milk .....	82	7	8.5
Black puddings	1	—	—	Mince meat .....	1	—	—
Blanc Mange pdr	1	—	—	Mustard .....	1	—	—
Brandy .....	1	—	—	Olive oil .....	1	—	—
Brawn .....	1	1	100	Pepper .....	3	—	—
Bread .....	1	—	—	Pickles .....	4	—	—
Bronchial cough mixtures.....	1	—	—	Powdered gelatine	1	—	—
Cake .....	5	—	—	Processed cheese	2	—	—
Castor sugar .....	1	—	—	Pudd. mixtures	2	—	—
Choc. cake cover.	1	1	100	Raisins .....	1	—	—
Cocoa .....	1	—	—	Rice .....	3	—	—
Cordial .....	1	—	—	Rum .....	1	—	—
Cornflour .....	4	—	—	Saccharin tabs. ...	2	—	—
Cream .....	2	—	—	Sauces .....	8	—	—
Currants .....	2	—	—	Sausage .....	2	2	100
Curry powder.....	2	—	—	Soft drink cryst.	5	—	—
Dessic. coconut ...	1	—	—	Soup .....	3	—	—
Dripping.....	3	—	—	Spice .....	2	—	—
Epsom salts .....	1	—	—	Sugar .....	1	—	—
Fish cakes .....	2	—	—	Sultanas .....	1	—	—
Fish paste .....	8	—	—	Sweets .....	2	—	—
Flour .....	2	—	—	Table jellies .....	4	—	—
Gin .....	1	—	—	Tapioca .....	1	1	100
Gravy Browning	4	—	—	Tea .....	1	—	—
Ground almonds	1	—	—	Tinned Fish .....	2	—	—
Honey .....	3	—	—	Tinned Fruit .....	2	—	—
Ice Cream .....	8	—	—	Tinned meat .....	4	—	—
Ice Lolly .....	1	—	—	Tinned Milk .....	5	—	—
Icing Sugar .....	3	—	—	Tomato juice ...	1	—	—
Jams .....	6	—	—	Treacle .....	3	—	—
Lard .....	3	—	—	Vinegar .....	2	—	—
Lemon Cheese ...	2	—	—	Whisky .....	1	—	—
Action taken in regard to unsatisfactory samples is given on Page 109.					254	12	4.7



### Samples Not Up to Satisfactory Standards

ARTICLE	No. of Sample		REPORT	REMARKS
	Informal	Formal		
Milk	1		Milk in a bottle containing mould growth on the inside.	Fined £20 and costs.
Tapioca	20		The sample consisted of sago.	No action.
Milk	25		Deficient in fat to the extent of 3.3% and deficient in solids-not-fat to the extent of 2.3%.	Formal samples taken.
Milk	86		Deficient in fat to the extent of 6.6%.	No action.
Milk	95		Sub-standard but genuine milk, deficient in solids-not-fat to the extent of 8.2%.	No action.
Milk		100	Sub-standard but genuine milk, deficient in solids-not-fat to the extent of 3.9%.	No action.
Milk		103	Deficient in fat to the extent of 3.3%.	No action.
Sausage (beef).	127		Beef sausage containing sulphur dioxide preservative, the presence of which was not declared.	No action. General declaration displayed.
Cumberland or Cambridge Sausage	177		Sausage containing sulphur dioxide preservative, the presence of which was not decl.	No action. General declaration displayed.
Brawn	206		Meat product containing 3.3% of starchy matter, which should not be present in brawn.	Unable to purchase formal samples as deliveries to retailer had ceased. M.O.H. of area in which brawn is manufactured communicated with.
Choc. cake covering	224		Not conforming to the labelling requirements of the Labelling of Foods Order.	Warning letter to the Vendor.
Milk	237		Sub-standard but genuine milk, deficient in solids-not-fat to the extent of 1.1%.	No action.

## ANNUAL REPORT OF THE PUBLIC ANALYST

I am indebted to the Borough Analyst, Mr. J. Graham Sherratt, B.Sc., F.R.I.C. for the following remarks on the work carried out on behalf of the Corporation during the 12 months ended 31st December, 1960.

### Food and Drugs Act, 1955

Number of samples of Foods and Drugs analysed	....	....	254
Number of samples regarded as sub-standard or otherwise unsatisfactory	....	....	12
Percentage unsatisfactory	....	....	4.7

The above total of 254 samples included 82 samples of liquid milk and 172 samples of miscellaneous foods and drugs. The samples in the category described as "sub-standard or otherwise unsatisfactory" comprised 7 samples of liquid milk, 2 samples of sausages and one each of brawn, chocolate cake covering and tapioca.

### Milk

Three of the samples of milk were sub-standard but genuine, *i.e.*, they were slightly deficient in solids-not-fat but had normal freezing points, thus indicating that the deficiency was not due to the presence of extraneous water. One sample of milk was slightly deficient in both fat and solids-not-fat, but in this case also, the freezing point was satisfactory. Two samples of milk were deficient in fat only, the deficiencies being respectively 6.6 and 3.3 per cent. compared with the presumptive minimum established by the Sale of Milk Regulations. The composition of one sample of milk was satisfactory, but the inside of the bottle in which it was sold contained some mould growth.

### Sausage

The two samples of sausage were satisfactory in respect of meat content, but they contained undeclared preservative (sulphur dioxide). The Preservatives Regulations permit the presence of sulphur dioxide in sausages only if its presence is declared to the purchaser, either verbally or by notice, at the time of sale.

### Brawn

The sample of brawn contained 3.3 per cent. of starch, equivalent to approximately 5 per cent. of flour. Brawn is a product which should be made entirely from meat, with small additions of salt and spices, but it should not contain cereal or starch.

### Chocolate Cake Covering

The sample of chocolate cake covering was satisfactory in its general character, but it did not conform to the Labelling of Food Order. The Order prescribes a declaration of the ingredients to be made on the label of a pre-packed article, but this requirement was not complied with.

## Tapioca

The sample of "tapioca" consisted of sago. This is a very common substitution, and it is doubtful whether it really constitutes prejudice to a purchaser.

All the remaining samples were regarded as "genuine." Samples for which there are official standards of composition conformed in all respects, and other samples were regarded as of satisfactory commercial quality. One sample sold as "soup" was, in fact, a dried soup powder or "mix," but although attention was drawn to the technically incorrect description, the offence, if any, was trivial and unlikely to mislead a purchaser.

All the samples which might undergo decomposition were tested for preservative but, apart from the sausages referred to above, no infringement of the Preservatives Regulations was detected. In addition to the routine checks of composition a large proportion of the other samples was examined for the presence of metals, including lead, copper and arsenic, but no significant contamination was found in any of them.

## Composition of Milk Samples

The following is the average composition of samples of milk (excluding sub-standard samples) received during the year.

Average fat	....	....	....	....	....	3.69 per cent.
Average solids-not-fat			....	....	....	9.01 per cent.
Average water		....	....	....	....	87.30 per cent.

## Fertilisers and Feeding Stuffs Act, 1926

Nine samples were examined under this Act. They were all submitted for routine check of composition and included 5 samples of feeding stuffs and 4 fertilisers. One sample, described as "High Yield Cattle Food" contained only 18 per cent. of protein, instead of 22 per cent. declared. The deficiency in protein in this sample was 1.8 per cent. outside the permitted limits of variation. The composition of all the other samples was satisfactory.

## Water

Forty samples of drinking water were analysed during 1960. Of these, three were special samples submitted because of a complaint of abnormal odour or taste, which was described as "chemical" or "chlorinous." The organic condition of the samples was quite satisfactory, and the concentration of chlorine was minimal. Phenolic compounds, which often give rise to complaints of "chemical" taint in chlorinated water, were not present. The supply included some Thirlmere water, and it was suggested that the complaint might have arisen from some temporary local condition, such as chlorination of a part of the aqueduct after repair or maintenance operations. It is understood that the trouble did not recur.



One sample of domestic water contained slight traces of organic contamination, to which attention was drawn. It was considered that the sample was quite suitable for drinking purposes if the bacteriological condition (which is examined elsewhere) was satisfactory.

The chemical condition of all the other samples of drinking water was satisfactory and does not call for special comment. No instance of contamination with poisonous metals was detected.

J. GRAHAM SHERRATT,

*Public Analyst.*

## I N D E X

	<i>Page</i>
Ambulance Service	44-47
Analgesia and Anaesthesia	32
Ante-Natal Care	27
Atmospheric Pollution	91,93
Bacteriological Examination of Ice-Cream	102
Bacteriological Examination of Milk	101
Bacteriological Examination of Water	100
B.C.G. Vaccination	42
Bedding Loan Service	41
Births	12
Blind Welfare	75-79
Bronchitis	18
Burial of the Dead	75
Cancer	18-19
Care of Unmarried Mothers	27
Care of Expectant and Nursing Mothers and Children under School Age	26-30
Care of Premature Infants	32
Causes of Death with Death Rates	13
Chemical Analysis of Water	102
Children Act, 1948	34
Children Neglected or Ill-treated in their own homes	35
Child Welfare Centres	28
Chiropody Service	74
Civil Defence	47, 82
Clinics	26-28
Common Lodging Houses	96
Convalescence	48
Co-ordination and Co-operation with other parts of the National Health Service	60
Cremation	88
Deaf and Hard of Hearing Welfare	79-81
Death Rates for the last ten years	17
Dental Care and Treatment	29-30
Diphtheria Immunisation...	43
Disinfection and Distribution of Disinfectants	68
Domestic Help Service	52
Domiciliary Midwifery	31
Domiciliary Welfare of the Elderly	73
Emergency Obstetrical Unit	32
Examination of Water	100
Factories Acts	91-92
Family Planning Clinic	30
Fertilisers and Feeding Stuffs Act	111
Food and Drugs Act	108-110

	<i>Page</i>
Food Condemned .....	107
Food Hygiene .....	104
Food Premises .....	103
Food Sampling .....	91, 108, 110
Handicapped Persons Welfare .....	75-82
Health Committee .....	2
Health Education .....	48
Health Visiting .....	34
Home Nursing .....	35-40
Hope School .....	57
Houses Let-in-Lodgings .....	86
Housing .....	95-97
Ice-Cream Manufacturers, Retailers and Premises .....	101
Immunisation .....	43
Incidence of Sickness—Working Population .....	24
Infant and Young Children's Clinics .....	26-28
Infant Mortality .....	21-23
Infectious Diseases Notifications .....	63-67
Infectious Diseases, Prevalence and Control Over .....	61-68
Inquests and Uncertified Deaths .....	17
Inspection and Supervision of Food .....	99-112
Introduction .....	5
Legal Proceedings .....	97
Lunacy and Mental Treatment .....	53-56
Major Accident Organisation .....	60
Market Hall .....	104
Marylebone Training Centre .....	59
Maternal Mortality .....	21-22
Maternity Homes .....	32
Meals on Wheels Service .....	51
Meat Inspection .....	105-107
Medical Aid .....	31
Mental Health .....	53-56
Milk Supply .....	100
Morbidity .....	24
Natural and Social Conditions of the Area .....	9
Nursery .....	30
Nursery and Child Minders, Regulations Act, 1948 .....	30
Nursing Equipment .....	41
Offensive Trades .....	91
Ophthalmia Neonatorum .....	32
Pharmacy and Poisons Act .....	92
Places of Entertainment .....	92
Pneumonia ....	18
Post-Natal Clinics .....	27
Premature Births .....	20
Prevention of Break-up of Families .....	35
Prevention of Damage by Pests Act, 1949 .....	92



	<i>Page</i>
Prevention of Illness—Care and After-Care ....	48–52
Prevalence of and Control Over Infectious Disease ....	61–68
Principal Causes of Death at all ages ....	16
Protection of Movable Property ....	75
Provision of Health Services ....	25
Public Analyst's Annual Report ....	110–112
Public Baths ....	86
Public Cleansing ....	88
Public Health Inspection....	89–93
Public Conveniences ....	88
Radio-Telecommunications ....	47
Rag Flock and Other Filling Materials Regulations, 1951 ....	91
Refuse Collection and Disposal ....	88
Registrar General's Short List of Causes of Deaths ....	14–15
Removal of Persons Needing Care and Attention ....	74
Rent Act, 1957 ....	97
Residential Accommodation ....	70–73
Respiratory Diseases—Deaths ....	18
Retrolental Fibroplasia ....	33
Rivers and Streams ....	85
Rodent Control ....	92
Sanitary Circumstances of the Area ....	83
Sewerage and Sewage Disposal ....	85
Shops Acts ....	91
Sick Children Liaison Arrangements ....	36
Special Care Unit ....	59
Staff ....	2–4
Statistics ....	11–24
Temporary Accommodation ....	73
Trade Refuse ....	88
Training Centres ....	57–59
Transport of Midwives ....	32
Tuberculosis ....	18, 49–50
Tuberculosis Notifications ....	65–67
Vaccination—B.C.G. ....	42
Vaccination—Poliomyelitis ....	41–42
Vaccination—Smallpox ....	41
Vaccination—Tetanus ....	43
Venereal Disease ....	49
Vital Statistics ....	12
Voluntary Organisations ....	82
Water Supply ....	84–85
Welfare Foods, Distribution ....	29
Welfare Services ....	69–82
Whooping Cough Immunisation ....	43
Workshop Employment ....	79







